

DOCUMENT RESUME

ED 451 280

UD 034 055

AUTHOR Croan, Tara; Hatcher, Juliet; Jager, Justin; Long, Melissa; O'Hare, William; Wertheimer, Richard

TITLE The Right Start: City Trends. Conditions of Babies and Their Families in America's Largest Cities (1990-1998). Child Trends/KIDS COUNT Special Report.

INSTITUTION Annie E. Casey Foundation, Baltimore, MD.

PUB DATE 2001-02-20

NOTE 299p.; For The Right Start: Conditions of Babies and Their Families (1999), see ED 437 483.

AVAILABLE FROM Annie E. Casey Foundation, Attention: KIDS COUNT Special Report, 701 St. Paul Street, Baltimore, MD 21202. Tel: 410-547-6600; Fax: 410-547-6624; Web site: <http://www.kidscount.org>.

PUB TYPE Numerical/Quantitative Data (110) -- Reports - Descriptive (141)

EDRS PRICE MF01/PC12 Plus Postage.

DESCRIPTORS *Adolescents; Birth Weight; Blacks; *Child Health; Early Parenthood; Educational Attainment; Hispanic Americans; Poverty; Premature Infants; *Prenatal Care; Racial Differences; Smoking; Tables (Data); *Urban Areas

ABSTRACT

This report presents data for the nation's 50 largest cities for every year from 1990-98 on eight measures of a healthy start to life (teen births, repeat teen births, births to unmarried women, low maternal education, late or no prenatal care, smoking during pregnancy, low-birthweight births, and preterm births). It identifies cities that have seen notable improvements in specific measures and those that are performing much better than average. It expands on a 1999 report by updating data through 1998, providing annual data for each year back to 1990, offering a one-page narrative description of how each city fared during 1990-98, and publishing a companion book with state-level data. Findings reveal consistent disparity between birth outcomes in the 50 cities and those for the nation. Birth outcomes in the cities are not as good as those elsewhere. Children in the cities are more likely to experience each of five risks associated with negative child outcomes. While racial differences in birth outcomes exist, many actually reflect differences in income, education, and availability of effective services. Three appendixes include: cities ranked by indicator, 1998; definitions, data sources, and reporting issues; and primary contacts for state KIDS COUNT projects. (SM)

ERIC
Full Text Provided by ERIC

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

☒ This document has been reproduced as
received from the person or organization
originating it.

☐ Minor changes have been made to
improve reproduction quality.

☐ Points of view or opinions stated in this
document do not necessarily represent
official OERI position or policy.

PERMISSION TO REPRODUCE AND
DISSEMINATE THIS MATERIAL HAS
BEEN GRANTED BY

W.J. Rust
Annie E. Casey Foundation

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)

1

Child Trends/KIDS COUNT Special Report

ED 451 280

UD034055

THE RIGHT START CITY TRENDS

CONDITIONS OF BABIES AND THEIR FAMILIES IN AMERICA'S LARGEST CITIES (1990-1998)

BEST COPY AVAILABLE

The Annie E. Casey Foundation

2

3

KIDS COUNT, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the United States. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children. At the national level, the principal activity of the initiative is the publication of the annual *KIDS COUNT Data Book*, which uses the best available data to measure the educational, social, economic, and physical well-being of children. The Foundation also funds a nationwide network of state-level KIDS COUNT projects that provide a more detailed community-by-community picture of the condition of children.

Child Trends is a nonprofit, nonpartisan research organization dedicated to studying children, youth, and families through research, data collection, and data analyses. Child Trends conducts basic and applied research and evaluation studies; gathers and analyzes data on the major indicators of children's well-being; develops and tests new measures of child and family well-being; and communicates key research findings to policymakers and the public.

Child Trends/KIDS COUNT Special Report

THE RIGHT START CITY TRENDS

CONDITIONS OF BABIES AND THEIR FAMILIES IN AMERICA'S LARGEST CITIES (1990-1998)

Tara Croan, Juliet Hatcher, Justin Jager, Melissa Long, William O'Hare, Richard Wertheimer

The Annie E. Casey Foundation

Acknowledgments

This *Child Trends/KIDS COUNT Special Report* was produced and distributed with the help of numerous people. We greatly appreciate the efforts of Stephanie J. Ventura, M.A., of the National Center for Health Statistics, who educated us in the intricacies of producing reliable tabulations of birth statistics, alerted us to key connections among the measures we tabulated, and reviewed the text and tables included in this volume. Any remaining errors are the responsibility of the authors.

We thank numerous representatives of state departments of health for advising us on statistical reporting changes that affect the interpretations of trends in birth statistics.

We owe special thanks to Carol Emig, Director for Public Information and Policy at Child Trends, for reviewing the text, making valuable suggestions on how to present the material most effectively, and coordinating the publication and distribution process. We also acknowledge Eugenie Devine, Polly Dement, and others at Hager Sharp for their skillful dissemination of this report to the media.

The authors wish to thank the Annie E. Casey Foundation for providing the funding for this volume.

Finally, we would like to thank the state KIDS COUNT projects listed at the end of this report for their efforts to bring these and other data on children and families to the attention of national, state, and local leaders across the country.

Permission to copy, disseminate, or otherwise use information from this *Special Report* is granted as long as appropriate acknowledgment is given.

To obtain additional copies of this publication, call 410.223.2890 or write to the Annie E. Casey Foundation, Attn: *KIDS COUNT Special Report*, 701 St. Paul Street, Baltimore, MD 21202.

This report is also available on the Internet at www.childtrends.org and www.kidscount.org.

KIDS COUNT and Child Trends extend a special thanks to the National Center for Health Statistics (NCHS), the federal government's principal vital and health statistics agency and the source of the data presented in this publication. For several decades, NCHS has consistently gathered, disseminated, and explained health and vital statistics to the American public and to the research and policy communities. Its staff has consistently carried out this mission with exceptional attention to quality and accuracy. The agency performs a valuable and often overlooked public service, for which we are most grateful.

Table of Contents

4	Foreword
6	Introduction
17	City Profiles
18	Profiles in alphabetical order
129	Resources
130	Appendix 1: Cities Ranked by Indicator, 1998
134	Appendix 2: Definitions, Data Sources, and Reporting Issues
140	Appendix 3: Primary Contacts for State KIDS COUNT Projects

Foreword

Information is power. In *The Right Start City Trends*, KIDS COUNT and Child Trends provide a powerful tool to those who work to give every newborn in America “the right start.” For the nation’s 50 largest cities, we present data for every year from 1990 to 1998 on eight specific measures of a healthy and promising start to life. This level of detail enables readers to pinpoint the most urgent issues affecting birth outcomes in their cities and to fashion targeted, tailored responses. *The Right Start City Trends* also identifies cities that have seen notable improvements in specific measures and those that are performing much better than average.

As even casual observers recognize, the factors that promote a healthy birth are in short supply in many urban neighborhoods, while those that increase a baby’s risks are abundant. Babies in our big cities are much more likely than babies elsewhere in the country to be born to teenage and unmarried mothers, and to mothers who have had little or no prenatal care. They are also more likely to be born prematurely and at low birthweight. These odds are not insurmountable, as individual children and their parents prove every day. But statistically, children who start life under these less than optimal conditions face higher risks of short- and long-term problems.

While there were improvements in birth outcomes in the U.S. as a whole during the 1990s, this progress was not as visible in the nation’s largest cities as it was elsewhere in the country. Several important measures of a healthy birth remained virtually unchanged in America’s big cities during this prosperous decade, including the percentage of births that were low birthweight, the percentage that were preterm, and the percentage that were to teen mothers. When change for the better did occur, the results for urban newborns rarely matched national averages.

Still, we should not dismiss the measurable improvements that occurred in the last decade in some key indicators of a right start to life, for they demonstrate that progress is possible. For example, there were significant reductions in the percentage of mothers in the 50 largest cities who received late or no prenatal care, from 9 percent in 1990 to 5 percent in 1998. There was also a stunning drop in the nation’s largest cities in the percentage of mothers who smoked during pregnancy, from 18 percent in 1990 to 11 percent in 1998 -- the only measure in *The Right Start* on which urban America outperformed the rest of the country. In both cases, the progress we see should heighten the nation’s determination to figure out what works and to apply these lessons across the board.

While the pattern of urban disadvantage is clear, we also need to recognize the tremendous variation across cities on individual measures of a healthy and promising start. For example:

- In Charlotte, Honolulu, Oakland, San Antonio, and Seattle, less than 3 percent of mothers who gave birth in 1998 received late or no prenatal care. This is much lower than the 50-city average of 5 percent, and lower even than the national average of 4 percent. These five geographically dispersed and demographically diverse cities have established a benchmark for other cities and for the nation.
- In all but one of the 50 largest cities (San Francisco), at least a quarter of all births in 1998 were to unmarried women. Nonmarital childbearing increases the risk of infant mortality, poverty, and dropping out of school. Of particular concern are the dozen cities in which more than half of all births in 1998 were to single mothers -- Atlanta, Baltimore, Chicago, Cleveland, Detroit, Memphis, Miami, Milwaukee, New Orleans, Philadelphia, St. Louis, and Washington, DC.
- Several cities had particularly good news with respect to teen childbearing. In seven of the 50 largest cities, fewer than 10 percent of total births were to teens in 1998, lower than both the 50-city average of 15 percent and the national average of 13 percent. New York City is among these seven, as are three California cities (San Diego, San Francisco, and San Jose). They are joined by Honolulu, Seattle, and Virginia Beach.
- In contrast, in Baltimore, Cleveland, Memphis, Milwaukee, New Orleans, and St. Louis, births to teens accounted for more than 20 percent of total births in 1998, compared with 15 percent for the 50 largest cities overall, and 13 percent for the U.S. Children born to teenagers face multiple risks, including the risks of poverty, poor school performance, and school failure.

What accounts for the persistent gap between America’s largest cities and the rest of the nation? As the foreword to the 1999 edition of *The Right Start* pointed out, part of the answer lies in the dynamics of class and race in the U.S. A disproportionate share of low-income and minority populations reside in our large cities, so to some extent, statistics for urban children and families reflect the disadvantages of poverty and discrimination. The data in this edition further highlight the growing presence of Hispanics in urban America. The concentration of need and the diversity of cultures in our

Foreword

large cities combine to present both opportunities and challenges to those who seek effective ways to improve outcomes for vulnerable children and their families.

The Casey Foundation centers its work on the proposition that children do best when their families do well, and families do better when they live in supportive neighborhoods. The Foundation will continue its work with partners in cities across America to rebuild neighborhoods that support families raising children. Child Trends supports this effort through its work with KIDS COUNT and through its commitment to rigorous, nonpartisan research and data on children and families.

We urge readers to put the information in this report to powerful use as they work to give every child in America the right start.

Douglas W. Nelson
President
The Annie E. Casey Foundation

Kristin A. Moore
President
Child Trends

INTRODUCTION

16

17

Introduction

In 1999, the Annie E. Casey Foundation published *The Right Start: Conditions of Babies and Their Families in America's Largest Cities*, which provided 1997 city-level data for ten measures that characterize the well-being of newborns in the United States. Similar data for states were presented in the Appendix of that report.

In an effort to increase the usefulness of these indicators, we have expanded the original *Right Start* in several ways. First, we updated the data through 1998, the most recent year available. Second, we have provided annual data for each year back to 1990. Third, we have provided a one-page narrative description of how each city fared during the 1990-1998 period. Fourth, we are publishing a separate companion book focused on state-level data.

The remainder of this introduction focuses on the data contained in *The Right Start City Trends: Conditions of Babies and Their Families in America's Largest Cities (1990-1998)*. There is a similar introduction in the state volume which focuses on the data contained in that publication. To place our city-level results in context, we also present the value of each indicator averaged across the 50 largest cities. In addition, we present the value of each indicator for every state and the nation as a whole in a companion State volume titled *The Right Start State Trends: Conditions of Babies and Their Families Across the Nation (1990-1998)*.

We selected indicators that describe the well-being of infants at birth because conditions at birth often reflect the forces that will shape a young person's life. Indicators such as lack of timely prenatal care and smoking during pregnancy reflect social conditions prior to birth that can affect the health of an infant. Other measures, such as birthweight and gestation period, reflect health status at the time of birth. Finally, we included three characteristics of the mother (marital status, age, and education) that are likely to reflect conditions a newborn might experience early in life.

We utilize birth certificate data compiled and provided by the National Center for Health Statistics (NCHS) because they provide one of the few sets of systematic measures reflecting child well-being that are available consistently for all large cities. From the birth certificates we were able to construct eight measures, which reflect some dimension of well-being:

- 1) Teen Births
- 2) Repeat Teen Births
- 3) Births to Unmarried Women
- 4) Low Maternal Education

18

- 5) Late or No Prenatal Care
- 6) Smoking During Pregnancy
- 7) Low-Birthweight Births
- 8) Preterm Births

Findings

This compilation of nine years of data has revealed a consistent disparity between birth outcomes in the 50 largest cities and those for the nation as a whole. Although the measures show enormous variation across the 50 cities, birth outcomes in the largest cities are clearly not as good, on average, as those elsewhere. Table 1 shows how birth outcomes in the 50 largest cities compare to those nationwide. Here we show the simple 50-city averages, rather than weighted averages, to be consistent with the data presented for each city in the next section of this report. In all but one case (the exception is smoking during pregnancy), the outcomes in large cities are worse than for the nation as a whole.

Moreover, as shown in Figure 1, children in central cities are more likely to experience each of five risks associated with negative child outcomes. For all of the characteristics, children living within central cities are more likely to exhibit the attribute than are children living outside of central cities.

It is important to recognize that the citywide numbers presented here may mask important variations within a city. For example, studies in Baltimore and Cleveland show that negative birth outcomes such as low-birthweight and infant mortality are concentrated in neighborhoods with high poverty and/or low per capita income.¹ Studies suggest that negative birth outcomes are part of a constellation of measures that point toward particular neighborhoods with concentrated poverty and diminished opportunity.²

While these measures can hardly capture the full range of forces shaping the lives of newborns, the indicators used in this series reflect several important dimensions of a newborn's life. Moreover, these indicators are, for the most part, consistently measured across all of the cities and over time, permitting legitimate comparisons. Since many of the conditions related to a birth are linked to later developmental problems, the data illuminate future prospects for children in these cities.

19

Introduction

The 55 cities that are the focus of this Special Report include the 50 largest cities as of 1997* (according to population estimates from the U.S. Census Bureau) plus 5 cities that are not in the top 50, but are part of the Casey Foundation's 22-city Making Connections initiative. Of the 22 cities, 16 are among the 50 largest cities in the country, 5 more are shown here, and 1 (Camden, New Jersey) could not be included because the population is below 100,000, which is the cutoff point that NCHS has set for providing data in the detail shown in this report. For a list of all 22 cities, see the end of this section.

The key indicators of birth outcomes used here are all taken from data compiled by NCHS and reflect the official data for each indicator. While these measures are not derived from samples, many are based on relatively small numbers of births and therefore may exhibit a degree of random fluctuation from year to year. Since small differences among cities may reflect random fluctuations rather than "real" distinctions in the well-being of children, we urge readers to focus on those differences and changes over time that are relatively large.

In the following pages we describe each of the measures in more detail, explain why each measure was selected as an indicator of well-being, and discuss how the measure is related to broad, long-term outcomes.

Teen Births

Teenage childbearing is problematic because it is associated with diminished opportunities for both the child and the young mother. Teen births are particularly troublesome because most of these mothers are unmarried, and a large segment have not completed high school.

If a large share of births in a city is occurring to teenagers, it means that a significant number or proportion of children are starting life with a parent who is unlikely to have the resources needed to provide for a child. Most teenage mothers are not settled in a job or career, and many young fathers are not able to help. Data from the Census Bureau indicate that only 10 percent of mothers ages 15 to 17 received child-support payments in 1997.³ Data for all men between the ages of 16 to 19 from the March 2000 Current Population Survey show that only 58 percent had any earned income in

* We are using 1997 population to determine the 50 largest cities to be consistent with the original *Right Start* data book.

1999 and that the average annual income for those who worked was slightly less than \$6,000.⁴

Teenage mothers are also more likely to receive late or no prenatal care, although timely prenatal care by teens did increase over the 1990s.⁵ They also are more likely to smoke during pregnancy than older mothers. Moreover, unlike other age groups, the percent of teen mothers who smoke has increased since 1994.⁶

Children born to teenage mothers are less likely to obtain the emotional and financial resources they need to develop into independent, productive, well-adjusted adults. Thus, babies born to teens reflect a group of children who will have to overcome high odds to thrive.

In 1998, 15 percent of all births in the 50 largest cities occurred to teenagers. San Francisco had the lowest percent of total births to teenagers (6 percent), while Hartford had the highest (25 percent). For the 50 cities as a whole, the average percent of births to women under age 20 fluctuated between 15 and 16 percent from 1990 to 1995, and has remained at 15 percent since 1995 (See Table 2 for 1990 and 1998 data). It is important to note that the percent of total births to teenagers is influenced by the fertility of older women (above age 20) as well as by the childbearing patterns of teens.

Repeat Teen Births

Most teen mothers are ill equipped to provide for one child, and a second one severely compounds that challenge. Therefore, children born to a teenage mother who already has one or more children are unlikely to receive the kinds of support that children need to thrive. Moreover, a high rate of repeat teen births signals a problem with pregnancy prevention programs and offers a key opportunity for policy or program intervention.

In 1998, 24 percent of all teen births in the largest 48 cities* were repeat births. The percent of teen births to young women who were already mothers ranged from a low of 14 percent in Honolulu to a high of 32 percent in Atlanta. The city average for this indicator fluctuated throughout the 1990s. After increasing slightly from 27 percent in 1990 to 28 percent in 1992, the average fell every year from 1993 until 1995, when it hit a low

* Because the percentage of teen births in which birth order was not stated or unknown was very high in Oklahoma in 1998, teen repeat birth data are unreliable for Oklahoma City and Tulsa. Consequently, they are excluded from the average in 1998.

Introduction

of 23 percent. It has risen slightly since then, ultimately reaching 24 percent in 1998 (see Table 2 for 1990 and 1998 data).

Births to Unmarried Women

Research shows that children growing up with a single mother "are more likely to drop out of school, to give birth out of wedlock, to divorce or separate, and to be dependent on welfare."⁷ Numerous recent studies document the importance of fathers in the lives of their children. "Children develop best when they are provided with the opportunity to have warm, intimate, continuous, and enduring relationships with both their fathers and their mothers."⁸ Even if a marriage fails, children born into a married couple family have advantages over those born to unmarried women. In 1998, the poverty rate for single-parent families headed by a never-married mother was 55 percent, compared to 35 percent for families headed by a divorced or separated mother. Also, in 1998, the infant mortality rate of children born to an unmarried mother was almost twice that of children born to married mothers (10.2 compared to 5.7 deaths per 1,000 live births).⁹

Moreover, the likelihood of a child receiving a child-support award reflects the marital status of parents at the time of birth. Data from 1997 indicate that among never-married single parents, only 47 percent had a child-support award in place, compared to 70 percent of divorced single parents. It should be noted, however, that many custodial parents with child-support awards in place never receive the money that they are due. Only 22 percent of never-married single mothers actually received child-support payments in 1997, compared to 47 percent of divorced single parents.¹⁰

Finally, unmarried mothers are more likely to receive inadequate prenatal care than are their married counterparts.¹¹

Forty-three percent of all births in the 50 largest cities occurred to unmarried women in 1998. The percent of total births to unmarried women ranged from a low of 24 percent in San Francisco to a high of 78 percent in Hartford. The 50-city data show that nonmarital childbearing increased during the early 1990s. A recent report details some of the factors associated with these trends.¹² The percent of total births to unmarried women increased from 41 percent in 1990 to 45 percent in 1993 and was 43 percent in 1998 (see Table 2 for 1990 and 1998 data).

Low Maternal Education

Research has consistently shown that the education level of a child's mother is a good predictor of many child outcomes.¹³ Consequently, children born to women who have not graduated from high school face tough odds. The infant mortality rate for births to women with less than 12 years of education was 9.1 deaths per 1,000 live births in 1998, compared to 6.3 for women with at least a high school education.¹⁴ Women who do not get a good formal education are often less likely to provide the kind of educational and intellectual stimulation that their children need. In addition, parents with less education are less likely to be effective advocates for their children when they enter school or encounter problems with other institutions or public systems.

Finally, mothers with less than 12 years of education are more likely to smoke during pregnancy and to receive inadequate prenatal care.¹⁵

For the 50 largest cities, 27 percent of all births were to women with less than 12 years of education in 1998. The percent of total births to mothers with low levels of education ranged from a low of 9 percent in Honolulu to a high of 45 percent in Los Angeles. The percent of total births in the 50 largest cities to women with less than 12 years of education was 29 percent in 1990, 30 percent in 1991, 28 percent in 1995, and 27 percent in 1998 (see Table 2 for 1990 and 1998 data).

Late or No Prenatal Care

Mothers who receive timely prenatal care are less likely to have babies with health problems. Failure to obtain early prenatal care may reflect a mother's indifference to her pregnancy, or it may reflect a lack of available health care. Either situation is cause for concern. A woman who makes sure that she gets proper prenatal care is also likely to make sure that she does other things to protect her newborn. Failure to find timely prenatal care may also reflect the fact that a woman is in a precarious situation where many other kinds of resources are simply not available. Among women of childbearing age (15 to 44), those living in central cities are much less likely than those living elsewhere to have health insurance. In 1999, 25 percent of women between the ages of 15 to 44 living in central cities had no health insurance, compared with 17 percent of women living outside of central cities.¹⁶ Since the availability of health insurance is related to obtaining good prenatal care, women in large cities are at a disadvantage.

Introduction

In the 50 largest cities, 5 percent of all births in 1998 were to women who received late or no prenatal care. The percentages in 1998 ranged from a low of 2 percent in Honolulu to a high of 13 percent in El Paso. As a 50-city average, this indicator fell yearly from 1990 to 1996, and remained constant every year since then. The percent of total births to mothers receiving late or no prenatal care started at 9 percent in 1990, fell to 5 percent in 1996, and remained at 5 percent through 1998 (see Table 2 for 1990 and 1998 data).

Smoking During Pregnancy

Babies born to mothers who smoked during pregnancy are more likely to have health problems. "Smoking during pregnancy is associated with adverse outcomes, including low-birthweight, intrauterine growth retardation and infant mortality as well as negative consequences for child health and development."¹⁷ Moreover, smoking during pregnancy may be symptomatic of other conditions that reflect an unhealthy approach to pregnancy and childbearing.

For the 41 cities with data in 1998,^{*} 11 percent of the total births were to mothers who smoked during pregnancy. The rates ranged from a low of 2 percent in Miami to a high of 24 percent in Des Moines. For the same set of cities, the share of babies born to mothers who smoked during pregnancy has been declining, dropping from 18 percent in 1990 to 11 percent in 1998 (see Table 2 for 1990 and 1998 data).

Low-Birthweight Births (Less Than 5.5 Pounds)

While most American children get off to a healthy start, babies weighing less than 2,500 grams (about 5.5 pounds) at birth have a high probability of experiencing developmental problems, suffering from serious illnesses, and dying in the first year of life.^{18, 19} Therefore, the percent of low-birthweight births reflects a group of children who are more likely to have health problems as they move through the growth stages than are children born at a normal weight.

Nationally, 298,208 babies were born weighing less than 5.5 pounds in 1998, accounting for 8 percent of all births. The relatively high rate of low-birthweight births in the U.S. raises a number of troubling issues. Research

^{*} Data for 1998 on smoking during pregnancy on birth certificates in California and Indiana were either not available or not compatible with NCHS standards. Therefore, data for the cities in these states are not included in the average.

shows that women who do not receive adequate early prenatal care are more likely to give birth to a low-birthweight baby and that mothers who lack health insurance are less likely to seek and obtain prenatal care. According to Census Bureau data for 1999, more than one-third (33 percent) of all Hispanics and more than one-fifth (21 percent) of all black non-Hispanics did not have health insurance. People living in poverty, high school dropouts, and young adults (ages 18 to 24) are among those that are the least likely to have health insurance.²⁰ Among women of childbearing age (15 to 44), 25 percent of those living in central cities lacked health insurance, compared to 16 percent of those living in the suburbs. Among Hispanic women of childbearing age living in central cities, 41 percent lacked health insurance.²¹

Nine percent of all births in the 50-largest cities in 1998 were low-birthweight births. In 1998, Mesa had the lowest rate of low-birthweight births at 6 percent, and Baltimore had the highest rate at 14 percent. During the 1990s, the share of babies born weighing less than 5.5 pounds in the 50 largest cities remained constant at 9 percent (see Table 2 for 1990 and 1998 data).

Preterm Births (Less Than 37 Completed Weeks of Gestation)

Babies born preterm often suffer related health and development problems; preterm births are often of low-birthweight. A shortened gestation period is also related to an increased risk of infant death (death in the first year of life).²²

Thirteen percent of births in the 50 largest cities in 1998 were preterm births. San Jose had the lowest percent of births that were preterm in 1998 at 9 percent, while St. Louis had the highest rate at 21 percent. The 50-city average for this indicator stayed at 13 percent every year from 1990 to 1998, except in 1996 when it was 12 percent.

Race and Hispanic Origin

For every measure that characterizes the well-being of U.S. newborns in this volume, there are substantial differences by race and Hispanic origin. With the exception of smoking during pregnancy, births to (non-Hispanic) whites have a lower value for each measure than births to (non-Hispanic) blacks (see Table 3). Values for Hispanics often, but not always, fall in between the values for whites and blacks. In 1998, for example, 9 percent

of U.S. births to whites were to teen mothers, compared with 22 percent of births to blacks and 17 percent of births to Hispanics. Given these racial and ethnic differences, it is not surprising to note that differences seen among cities are often related to differences in racial/ethnic composition in the cities. Cities in which black and/or Hispanic births are a large percentage of total births tend to have higher values for most measures than cities in which most births are to whites.

At the same time, it is important to recognize that many of the differences between whites and minorities reflect differences in things such as educational attainment, income, and the availability of high-quality services. For example, 9 percent of U.S. births to women with less than 12 years of education are low-birthweight, compared with only 6 percent of births to women with at least 16 years of education. Since 30 percent of white births are to women with at least 16 years of education, compared with 11 percent for blacks, part of the apparent racial difference in low-birthweight births is due to differences in the educational attainment of white and black mothers.

Birth outcomes are often examined by race and Hispanic origin because they are easily available. Questions about race and Hispanic origin status are included on births certificates in all 50 states and the District of Columbia, while many important measures of socioeconomic status (*e.g.*, family income) are not. Consequently, while racial differences are easily calculated it is not possible to tabulate the measures of well-being used in this publication by critical measures such as the mother's poverty status.

In short, the racial differences in birth outcomes are real, but it is important to recognize that many of those differences actually reflect differences in things like income, education and availability of effective services.

* Exceptions are low-birthweight births and preterm births. Hispanics have about the same values for these measures as whites.

Making Connections Cities

Atlanta, GA
Baltimore, MD
Boston, MA
Camden, NJ
Denver, CO
Des Moines, IA
Detroit, MI
Hartford, CT
Indianapolis, IN
Louisville, KY
Miami, FL
Milwaukee, WI
New Orleans, LA
Oakland, CA
Philadelphia, PA
Providence, RI
St. Louis, MO
San Antonio, TX
San Diego, CA
Savannah, GA
Seattle, WA
Washington, DC

Introduction

TABLE 1

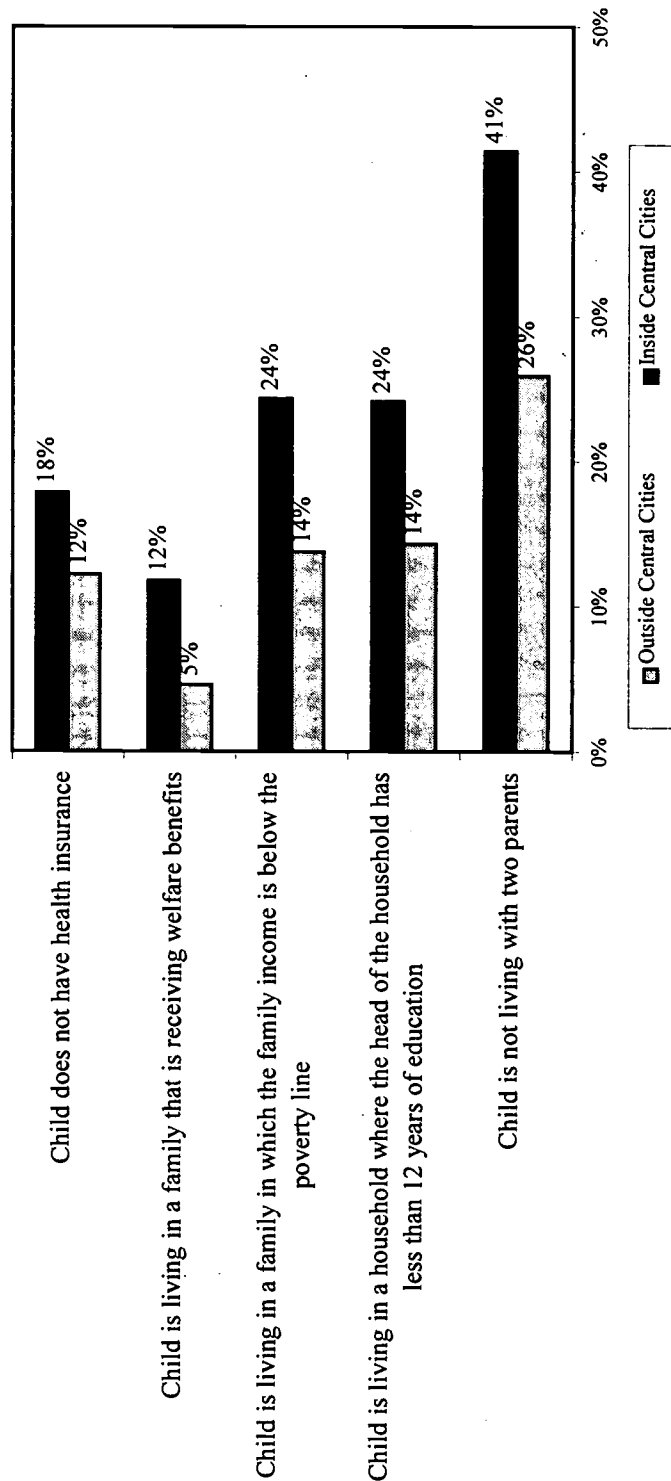
Key Indicators of Births in the 50 Largest Cities and Nationwide: 1998

Indicator	50-City Average	The Nation
Percent of total births to teens	15	13
Percent of teen births to women who were already mothers*	24	22
Percent of total births to unmarried women	43	33
Percent of total births to mothers with less than 12 years of education	27	22
Percent of total births to mothers receiving late or no prenatal care	5	4
Percent of total births to mothers who smoked during pregnancy*	11	13
Percent low-birthweight births (less than 5.5 pounds)	9	8
Percent preterm births (less than 37 completed weeks of gestation)	13	12

SOURCE: The figures for the 50-City Average were calculated by Child Trends based on data provided by the National Center for Health Statistics. The figures for the nation come from, Ventura, S.J., Martin, J.A., Curtin, S.C., Mathews, J.J., and Park, M.M. (2000), "Births: Final Data for 1998," *National Vital Statistics Reports*, Vol. 48, No. 3. Hyattsville, MD: National Center for Health Statistics.

*Not all cities are included in the 50-city average and not all states are included in the national figure for this indicator because data were not collected in every state.

FIGURE 1
Characteristics of Children Inside and Outside Central Cities, 1998



SOURCE: Child Trends analysis of Census Bureau's March 2000 Current Population Survey.

Central cities is a term used by the Census Bureau to identify those large cities located at the core of metropolitan areas. Collectively, these figures represent about 500 cities nationwide. Outside central cities includes suburban as well as rural areas.

The figures shown here represent about 90 percent of American children. The location (inside central cities/outside central cities) of some respondents was not revealed in the data file released by the Census Bureau in order to protect their confidentiality.

Introduction

TABLE 2

Changes in 50-City Averages: 1990 and 1998

Indicator	1990	1998
Percent of total births to teens	15	15
Percent of teen births to women who were already mothers**	27	24
Percent of total births to unmarried women*	41	43
Percent of total births to mothers with less than 12 years of education*	29	27
Percent of total births to mothers receiving late or no prenatal care	9	5
Percent of total births to mothers who smoked during pregnancy***	18	11
Percent low-birthweight births (less than 5.5 pounds)	9	9
Percent preterm births (less than 37 completed weeks of gestation)	13	13

SOURCE: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

*Not all cities are included in the 50-city average for 1990.

**Not all cities are included in the 50-city average for 1998.

***Not all cities are included in the 50-city averages for 1990 and 1998.

TABLE 3

Percentage of U.S. births with selected characteristics by race and Hispanic origin, 1998

Race/ethnicity	Teen births	Repeat teen births	Births to unmarried women	Low maternal education	Late or no prenatal care	Smoking during pregnancy	Low-birthweight births	Preterm births
White non-Hispanic	9	18	22	13	2	16	7	10
Black non-Hispanic	22	27	69	27	7	10	13	18
Hispanic	17	24	42	49	6	4	6	11

SOURCES: Ventura, S.J., Martin, J.A., Curtin, S.C., Mathews, J.J., and Park, M.M. (2000), "Births: Final Data for 1998," *National Vital Statistics Reports*, Vol. 48, No. 3. Hyattsville, MD: National Center for Health Statistics. Curtin, S.C. and Martin, J.A. (2000), "Births: Preliminary Data for 1999," *National Vital Statistics Reports*, Vol. 48, No. 14. Hyattsville, MD: National Center for Health Statistics.

Introduction

¹ Coulton, C., and Pandey, S. (1992), "Geographic Concentration of Poverty and Risk to Children in Urban Neighborhoods," *American Behavioral Scientist*, Vol. 35, No. 3. O'Campo, P., Xue, X., Wang, M., and Caughey, M.O. (1997), "Neighborhood Risk Factors for Low Birthweight in Baltimore: A Multilevel Analysis," *American Journal of Public Health*, Vol. 87, No. 7.

² Ibid.

³ U.S. Census Bureau (2000), "Child Support 1997," October 13, 2000, <<http://www.census.gov/hhes/www/childsupport/97tables/tab4w.html>>.

⁴ Child Trends (2001), Special tabulations of the March 2000 Current Population Survey.

⁵ Ventura, S.J., Curtin, S.C., and Mathews, T.J. (2000), "Variations in Teenage Birth Rates, 1991-98: National and State Trends," *National Vital Statistics Reports*, Vol. 48, No. 6. Hyattsville, MD: National Center for Health Statistics.

⁶ Ibid.

⁷ Garfinkel, I. and McLanahan, S.S. (1986), *Single Mothers and Their Children*, The Urban Institute, Washington, DC, pp. 1-2.

⁸ Popenoe, David (1996), *Life Without Father: Compelling New Evidence that Fatherhood and Marriage Are Indispensable for the Good of Children and Society*, The Free Press, New York, NY.

⁹ Mathews, T.J., Curtin, S.C., and MacDorman, M.F. (2000), "Infant Mortality Statistics from the 1998 Period Linked Birth/Infant Death Data Set," *National Vital Statistics Reports*, Vol. 48, No. 12. Hyattsville, MD: National Center for Health Statistics.

¹⁰ Grail, Timothy, U.S. Census Bureau (2000), "Child Support for Custodial Mothers and Fathers," October 2000, <<http://www.census.gov/prod/2000pubs/p60-212.pdf>>.

¹¹ Ventura, S.J. (1995), "Births to Unmarried Mothers: United States, 1980-1992," *Vital and Health Statistics*, Vol. 21, No. 53, Hyattsville, MD: National Center for Health Statistics.

¹² Ventura, S.J., and Bachrach, C.A. (2000), "Nonmarital childbearing in the United States, 1940-1999," *National Vital Statistics Reports*, Vol. 48, No. 16. Hyattsville, MD: National Center for Health Statistics.

¹³ Haveman, R.B. and Wolfe, B. (1995), "The Determinants of Children's Attainments: A Review of Methods and Findings," *Journal of Economic Literature*, Vol. 33, No. 4.

¹⁴ Mathews, T.J., Curtin, S.C., and MacDorman, M.F. (2000), "Infant Mortality Statistics from the 1998 Period Linked Birth/Infant Death Data Set," *National Vital Statistics Reports*, Vol. 48, No. 12. Hyattsville, MD: National Center for Health Statistics.

¹⁵ Ventura, S.J., Martin, J.A., Curtin, S.C., Mathews, J.J., and Park, M.M. (2000), "Births: Final Data for 1998," *National Vital Statistics Reports*, Vol. 48, No. 3. Hyattsville, MD: National Center for Health Statistics.

¹⁶ Child Trends (2001), Special tabulations of the March 2000 Current Population Survey.

¹⁷ Mathews, T.J. (1998), "Smoking During Pregnancy, 1990-96," *National Vital Statistics Reports*, Vol. 47, No. 10, Hyattsville, MD: National Center for Health Statistics, p. 1.

¹⁸ Mathews, T.J., Curtin, S.C., and MacDorman, M.F. (2000), "Infant Mortality Statistics from the 1998 Period Linked Birth/Infant Death Data Set," *National Vital Statistics Reports*, Vol. 48, No. 12. Hyattsville, MD: National Center for Health Statistics.

¹⁹ MacDorman, M.F. and Atkinson, J.O. (1999), *National Vital Statistics Reports*, "Infant Mortality Statistics from the 1997 Period Linked Birth/Infant Death Data Set," Vol. 47, No. 23. Hyattsville, MD: National Center for Health Statistics.

²⁰ Mills, R.J., U.S. Census Bureau (2000), "Health Insurance Coverage," published September 2000, <<http://www.census.gov/prod/2000pubs/p60-211.pdf>>.

²¹ Annie E. Casey Foundation (2000), Special tabulations of the March 2000 Current Population Survey.

²² MacDorman, M.F. and Atkinson, J.O. (1999), *National Vital Statistics Reports*, "Infant Mortality Statistics from the 1997 Period Linked Birth/Infant Death Data Set," Vol. 47, No. 23. Hyattsville, MD: National Center for Health Statistics.

CITY PROFILES

38

The Annie E. Casey Foundation

39

Child Trends KIDS COUNT Special Report

The Right Start City Trends

17

The yearly number of births in Albuquerque increased from 7,417 in 1990 to 7,848 in 1998. This change is due primarily to an increase in births to Hispanics, while births to whites decreased.* Consequently, the Hispanic share of total births increased from 47 percent in 1990 to 52 percent in 1998.

Albuquerque experienced a sharp decline in the proportion of teen births to young women who already had a child and a striking increase in the percentage of births to unmarried women. A rise in the share of Albuquerque births to women who smoked during pregnancy ran counter to the downward trend among the 50 largest cities as a group (see figure).

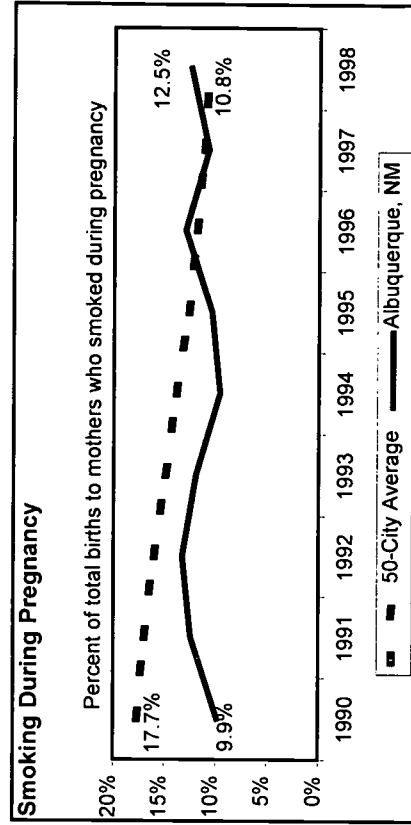
More specifically:

- **Teen births.** Teen births became a larger share of Albuquerque births during the 1990s. While teenagers accounted for 14 percent of Albuquerque births in 1990 and 1991, they made up 16 percent in 1997 and 1998. This upward trend contrasts with a stable pattern for the 50 largest cities overall at 15 percent.
- **Repeat teen births.** Albuquerque experienced a sharp decline in the percentage of teen births to young women who were already mothers, from 24 percent in 1990 to 18 percent in 1998. Throughout this time, repeat teen births accounted for a smaller share of teen births in Albuquerque than in the 50 largest cities as a group.
- **Births to unmarried women.** The percentage of Albuquerque births to unmarried women rose from 33 percent in 1990 to 41 percent by 1998. This rise outpaced a similar increase for the 50 largest cities as a whole. However, Albuquerque remained below the 50-city average for this measure throughout the 1990s.
- **Low maternal education.** During the 1990-1998 period, there was a small overall increase in the percentage of Albuquerque births to women with less than 12 years of education, from 21 percent in 1990 to 23 percent in 1998. Nonetheless, Albuquerque remained below the 50-city average on this indicator throughout the 1990s.
- **Late or no prenatal care.** The proportion of Albuquerque births to women receiving late or no prenatal care dropped markedly—from 12 percent in 1990 to 6 percent in 1997—but then rose sharply to 9 percent

by 1998. This increase from 1997 to 1998 brought the city well above the 50-city average in 1998.

- **Smoking during pregnancy.** Despite fluctuations during the 1990s, Albuquerque experienced an overall increase in the share of births to mothers who smoked during pregnancy, from 10 percent in 1990 to 13 percent in 1998. This trend is counter to a strong decline in maternal smoking in the 50 largest cities as a group.
- **Low-birthweight births.** The percentage of low-birthweight births in Albuquerque declined from 8 percent in 1990 to 7 percent in 1993, then remained stable at 8 percent through 1998. Albuquerque was consistently below the 50-city average of 9 percent for this measure throughout the decade.
- **Preterm births.** Throughout the 1990s, preterm births were less prevalent in Albuquerque than in the 50 largest cities as a group. In 1998, 11 percent of births in Albuquerque were preterm, compared with 13 percent in the 50 largest cities.

In summary, during the 1990-1998 period, Albuquerque saw significant improvements in two measures of a healthy start to life, while losing ground on four other measures. The city saw substantial declines in the percentage of teen births that were repeat births and in the proportion of births to mothers receiving late or no prenatal care. However, during the same period, there were also increases in the shares of births to teens and unmarried women, births to women with less than 12 years of education, and births to women who smoked during pregnancy.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Albuquerque, NM	13.8	13.8	14.6	15.3	15.4	15.3	14.6	15.6	15.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Albuquerque, NM	24.1	21.9	22.6	20.4	21.1	20.2	17.0	17.2	17.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Albuquerque, NM	33.1	36.2	36.6	38.0	38.3	38.2	37.5	40.4	40.6
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Albuquerque, NM	20.6	20.5	22.2	22.9	22.4	22.5	22.1	21.5	23.4
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Albuquerque, NM	11.9	11.5	7.4	7.2	6.1	6.7	6.2	5.9	8.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Albuquerque, NM	9.9	12.4	13.3	12.0	9.6	10.4	13.0	10.8	12.5
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Albuquerque, NM	8.2	7.6	7.7	7.3	8.2	8.1	7.7	8.2	8.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Albuquerque, NM	10.6	9.8	9.9	11.0	11.1	10.6	10.4	10.4	11.0
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,305	3,246	3,245	3,272	3,148	3,089	2,884	2,993
	Black non-Hispanic	202	215	187	227	198	173	201	206
	Hispanic	3,466	3,656	3,808	3,735	3,918	3,915	3,994	4,102
	Other	444	434	470	469	494	452	461	547
	Total	7,417	7,551	7,710	7,703	7,758	7,593	7,540	7,848

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Atlanta, GA

The yearly number of births in Atlanta remained relatively stable during the 1990s, decreasing only slightly from 9,101 in 1990 to 8,744 in 1998.

During this period, the black share of total births dropped from 77 percent in 1990 to 63 percent in 1998,* while the percentage of births to Hispanics increased dramatically, from 3 percent in 1990 to 12 percent in 1998.

Atlanta experienced improvements in seven measures of a healthy start to life during the 1990s.** The most striking of these were remarkable reductions in the percentages of births to mothers who received late or no prenatal care (see figure) and to mothers who smoked during pregnancy.

More specifically:

- **Teen births.** During the 1990s, the share of Atlanta births to teenagers declined substantially, from 22 percent in 1990 to 17 percent in 1998. This decrease brought Atlanta closer to the average for the 50 largest cities, where 15 percent of births were to teens in 1998.
- **Repeat teen births.** The percentage of Atlanta teen births to young women who already had a child fluctuated during the 1990-1998 period, with an overall decrease from 36 percent in 1990 to 32 percent in 1998. In 1998, Atlanta was above the average for the 50 largest cities, where 24 percent of teen births were repeat births.
- **Births to unmarried women.** There was a striking reduction in the proportion of Atlanta births to unmarried women during the 1990s, from 64 percent in 1990 to 56 percent in 1998. Although the 50 largest cities as a group saw an increase in the proportion of births to unmarried women over the nine-year period, Atlanta remained well above the 50-city average of 43 percent in 1998.
- **Low maternal education.** The percentage of Atlanta births to women with less than 12 years of education ranged between 28 percent and 31 percent during the 1990-1998 period. In 1998, 29 percent of Atlanta births were to mothers with less than 12 years of education, compared with 27 percent of births in the 50 largest cities.
- **Late or no prenatal care.** Atlanta saw a dramatic drop in the share of births to mothers who received late or no prenatal care, from 12 percent in 1990 to 4 percent in 1998. This sharp drop outpaced the downward

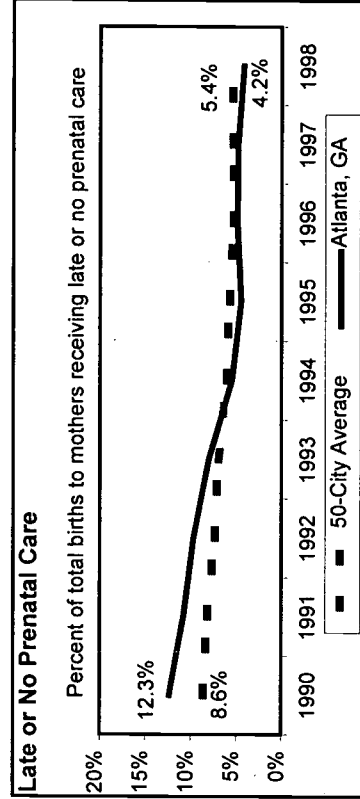
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Problems with geographic coding of city data have been identified for Atlanta. These problems may affect the data throughout the 1990-1998 period. See Appendix 2 for more details.

trend of the 50 largest cities as a group, and Atlanta was below the 50-city average of 5 percent in 1998.

- **Smoking during pregnancy.** During the 1990s, both Atlanta and the 50 largest cities as a whole saw a decline in the share of births to mothers who smoked during pregnancy. Throughout this time, smoking during pregnancy was less common in Atlanta than in the 50 largest cities overall. In 1998, 7 percent of Atlanta births were to mothers who smoked during pregnancy, compared with 11 percent in the 50 largest cities.
- **Low-birthweight births.** Low-birthweight births remained more prevalent in Atlanta than in the 50 largest cities as a group throughout the 1990-1998 period. In 1998, more than 11 percent of Atlanta births were low-birthweight, compared with a 50-city average of 9 percent.
- **Preterm births.** There was a notable drop in the proportion of Atlanta births that were preterm, from 18 percent in 1990 to 14 percent in 1998. This change brought Atlanta closer to the steady 50-city average of 13 percent in 1998.

In summary, Atlanta saw marked improvements in seven of eight measures of a healthy start to life during the 1990-1998 period. The most dramatic of these improvements include sharp drops in the percentages of births to mothers who received late or no prenatal care and to mothers who smoked during pregnancy. On several important measures, the improvements during this time narrowed the gap between Atlanta and the 50-city averages.



Trends In Key Indicators, 1990-1998

Indicator* **	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens	Atlanta, GA	22.2	21.4	21.4	21.1	20.2	19.8	18.9	17.1
	50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	14.9	14.7
Percent of teen births to women who were already mothers	Atlanta, GA	35.8	36.7	40.0	36.3	33.7	28.1	31.7	32.3
	50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.6	23.7
Percent of total births to unmarried women	Atlanta, GA	64.0	64.4	64.9	63.4	59.5	57.2	58.0	56.2
	50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.3
Percent of total births to mothers with less than 12 years of education	Atlanta, GA	27.9	29.6	29.8	29.7	29.6	29.2	31.1	29.4
	50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7
Percent of total births to mothers receiving late or no prenatal care	Atlanta, GA	12.3	10.8	9.7	8.0	5.5	4.5	4.9	4.2
	50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4
Percent of total births to mothers who smoked during pregnancy	Atlanta, GA	13.3	12.1	10.5	9.4	9.7	8.4	7.4	6.9
	50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	10.8
Percent low-birthweight births (less than 5.5 lbs)	Atlanta, GA	12.5	12.5	12.9	12.0	11.4	11.9	10.8	11.4
	50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8
Percent preterm births (less than 37 completed weeks of gestation)	Atlanta, GA	18.1	18.4	18.4	16.2	15.4	14.7	14.0	14.0
	50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	1,605	1,546	1,603	1,640	1,773	1,869	1,773	1,912
	Black non-Hispanic	7,033	6,725	6,733	6,321	5,967	5,454	5,479	5,467
	Hispanic	292	324	378	421	542	653	738	1,045
	Other	171	166	164	156	227	171	193	320
	Total	9,101	8,761	8,878	8,538	8,509	8,147	8,407	8,744

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See footnote ** in text and Appendix 2.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Austin, TX

The yearly number of births in Austin rose during the 1990s, from 9,200 in 1990 to 11,249 in 1998, due largely to a rise in births to Hispanics. While Hispanic births accounted for 33 percent of Austin births in 1990, they made up 42 percent in 1998.

Between 1990 and 1998, Austin saw a dramatic reduction in the percentage of births to women who smoked during pregnancy—a percentage that was already well below the 50-city average in 1990 (see figure). Other noteworthy changes include increases in the percentages of preterm births and births to mothers with less than 12 years of education.

More specifically:

- **Teen births.** Teen births were slightly less common in Austin than in the 50 largest cities as a group during the 1990-1998 period. In 1998, 14 percent of Austin births were to teen mothers, compared with 15 percent of births in the 50 largest cities.
- **Repeat teen births.** The percentage of Austin teen births to young women who already had a child fluctuated somewhat during the 1990s, but did not undergo a statistically significant change from 1990 to 1998. In 1998, repeat teen births accounted for 26 percent of teen births in Austin, not significantly different from the 50-city average.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.** In 1998, Austin was substantially below the 50-city average on this measure; 31 percent of Austin births were to unmarried women, compared with 43 percent of births in the 50 largest cities.
- **Low maternal education.** The share of Austin births to women with less than 12 years of education rose from 28 percent in 1990 to 32 percent in 1998. In contrast, the 50 largest cities as a whole experienced a downward trend on this measure during this time.
- **Late or no prenatal care.** During the 1990s, the proportion of births to mothers who received late or no prenatal care remained relatively stable in Austin, while dropping sharply for the 50-largest cities overall. In 1998, births to women receiving late or no prenatal care

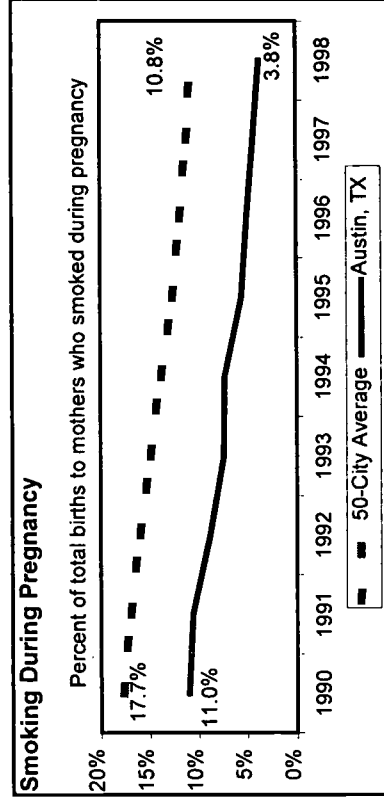
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

accounted for 4 percent of births in Austin, compared with 5 percent in the 50 largest cities.

- **Smoking during pregnancy.** The percentage of Austin births to women who smoked during pregnancy fell dramatically, from 11 percent in 1990 to just 4 percent in 1998. There was a parallel drop in the 50-city average, but smoking during pregnancy remained markedly less common in Austin than in the 50 largest cities as a group throughout the nine-year period.
- **Low-birthweight births.** Low-birthweight births were less prevalent in Austin than in the 50 largest cities as a whole throughout the 1990-1998 period. In both 1990 and 1998, low-birthweight births accounted for 7 percent of births in Austin, compared with a 50-city average of 9 percent.
- **Preterm births.** Preterm births became a larger share of Austin births over the 1990-1998 period, rising from 10 percent in 1990 and 1991 to 12 percent in 1998. Nonetheless, Austin remained below the 50-city average throughout this time.

In summary, when compared with the 50-city average, Austin's children got off to a healthier start to life on six of eight measures in 1998. Moreover, the city saw a striking decline in the percentage of births to mothers who smoked during pregnancy. At the same time, however, the city also experienced increases in the proportion of births to mothers with less than 12 years of education and in the share of births that were preterm.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Austin, TX	14.6	14.5	13.7	14.0	14.2	14.5	13.9	14.2	13.7
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Austin, TX	28.7	29.1	29.3	25.5	23.0	22.6	24.7	26.6	26.0
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Austin, TX**	N.R.	N.R.	N.R.	N.R.	26.2	26.9	27.3	29.5	30.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Austin, TX	28.1	27.9	27.4	27.5	27.6	27.9	29.4	31.6	31.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Austin, TX	4.7	4.8	4.3	4.0	3.9	4.3	4.3	3.9	4.4
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Austin, TX	11.0	10.6	8.9	7.4	7.3	5.6	5.0	4.4	3.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Austin, TX	6.8	6.7	6.2	7.0	6.0	6.7	6.8	6.8	7.3
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Austin, TX	10.4	10.3	10.8	11.2	10.8	10.7	10.9	11.1	12.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,504	4,269	4,315	4,163	4,259	4,327	4,309	4,592
	Black non-Hispanic	1,311	1,327	1,277	1,308	1,211	1,254	1,264	1,319
	Hispanic	3,070	3,106	3,357	3,470	3,613	3,864	4,147	4,448
	Other	315	317	330	399	403	440	491	592
	Total	9,200	9,019	9,279	9,340	9,486	9,885	10,211	11,249

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

BEST COPY AVAILABLE

50

Baltimore, MD

The yearly number of births in Baltimore declined by more than 30 percent, from 14,383 births in 1990 to 9,811 in 1998. A quarter of Baltimore births in 1998 were to whites and nearly three-quarters were to blacks.

During the 1990s, Baltimore experienced several improvements in measures of a healthy start to life, including marked declines in both the percentage of births to mothers who smoked during pregnancy and in the proportion of teen births to young women who were already mothers. Concurrently, the proportion of births to unmarried women increased considerably (see figure). The percentages of low-birthweight, preterm and teen births remained higher than the respective 50-city averages.

More specifically:

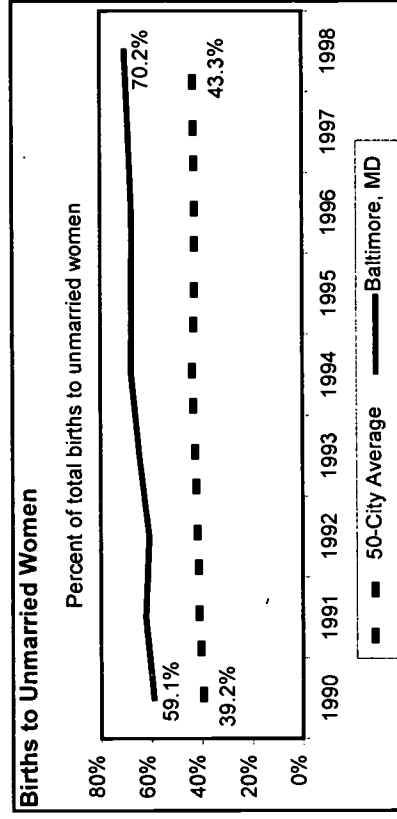
- **Teen births.** Teen births were far more common in Baltimore than in the 50 largest cities as a group in the 1990s. While teenagers accounted for 22 percent of Baltimore births in 1998, they accounted for only 15 percent of births in the 50 largest cities in the same year.
- **Repeat teen births.** Births to teens who already had a child were a substantially smaller share of all teen births in Baltimore in 1998 compared with 1990. The percentage of teen births that were repeat births fell from 34 percent in 1990 to 24 percent in 1996—matching the 1996 50-city average. However, the percentage rose to 26 percent by 1998.
- **Births to unmarried women.** The already large gap between Baltimore and the 50-city average widened during the 1990s for the percentage of births to unmarried women. The percentage of Baltimore births to unmarried women rose from 59 percent to 70 percent between 1990 and 1998.
- **Low maternal education.** The percentage of births to women with less than 12 years of education remained somewhat higher than the 50-city average throughout the 1990s. In 1998, mothers with less than 12 years of education accounted for 32 percent of births in Baltimore, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** There was a slight decrease in the percentage of Baltimore births to women who received late or no prenatal care, from 7 percent in 1990 to 6 percent in 1998. In 1998, the proportion of

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

births to mothers who received late or no prenatal care in Baltimore was close to the 50-city average of 5 percent.

- **Smoking during pregnancy.** Like the 50 largest cities as a whole, Baltimore experienced a striking decline in smoking during pregnancy in the 1990s. Mothers who smoked during pregnancy accounted for 15 percent of Baltimore births in 1998, compared with 23 percent in 1990.
- **Low-birthweight births.** The percentage of Baltimore babies born at a low birthweight remained higher than the 50-city average during the 1990-1998 period. In 1998, 14 percent of Baltimore births were low-birthweight, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** The percentage of births that were preterm in Baltimore was stable at 18 percent during the 1990-1998 period. This value remained substantially higher than the steady 50-city average of 13 percent.

In summary, Baltimore experienced improvements in four of eight indicators of a healthy start to life, including dramatic drops in the percentage of births to mothers who smoked during pregnancy and in the proportion of teen births that were repeat births. Simultaneously, the proportion of births to unmarried women increased substantially. Also, the percentages of preterm, low-birthweight, and teen births remained above the 50-city averages.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Boston, MA	11.3	11.4	11.5	11.6	12.0	11.3	10.5	10.7	10.6
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Boston, MA	22.9	22.1	22.6	23.5	20.7	18.3	19.2	17.5	16.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Boston, MA	45.3	47.7	48.2	48.3	48.6	46.9	45.6	45.5	44.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Boston, MA	26.7	26.9	26.8	25.2	25.4	24.1	22.3	21.4	21.4
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Boston, MA**	5.3	4.7	3.6	2.9	3.0	2.9	4.2	4.1	3.4
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Boston, MA	18.8	16.9	14.9	11.7	11.7	9.7	10.1	8.2	8.1
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Boston, MA	8.7	8.3	8.8	8.9	8.8	8.8	9.0	9.2	8.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Boston, MA	10.9	10.3	10.8	10.4	10.6	11.3	11.5	12.5	11.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic								
	3,897	3,589	3,377	3,155	3,027	2,836	2,765	2,688	2,838
	Black non-Hispanic								
	3,860	3,590	3,487	3,369	3,097	2,923	2,661	2,765	2,730
	Hispanic								
	1,887	1,878	1,748	1,679	1,713	1,653	1,513	1,663	1,760
Other									
703	652	679	623	631	661	661	817	721	560
Total									
10,347	9,709	9,291	8,826	8,468	8,073	7,756	7,837	7,888	

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See footnote ** in text and Appendix 2.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

BEST COPY AVAILABLE

59

The yearly number of births in Charlotte increased from 7,265 in 1990 to 9,295 in 1998. This increase was evident among all racial-ethnic groups but was particularly pronounced among Hispanics. Hispanics accounted for 8 percent of Charlotte births in 1998, compared with only 1 percent in 1990.*

During the 1990s, Charlotte experienced sizable reductions in the share of births to women who smoked during pregnancy and in the proportion of births to teenagers (see figure).

More specifically:

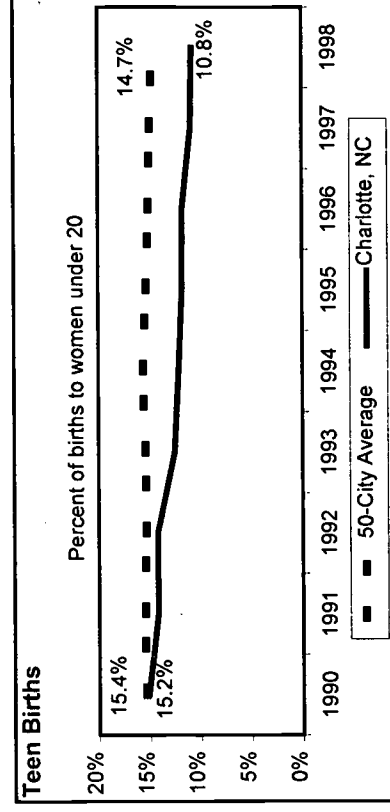
- **Teen births.** Teen births became a smaller share of total births in Charlotte over the 1990-1998 period. While births to teenagers accounted for 15 percent of births in 1990, they accounted for 11 percent of births in 1998. This drop brought Charlotte below the stable 50-city average of 15 percent.
- **Repeat teen births.** The proportion of Charlotte teen births to young women who already had a child fluctuated during the 1990s, ranging from a low of 20 percent in 1995 to a high of 31 percent in 1992. In 1998, 27 percent of Charlotte teen births were repeat births, not significantly different from the 50-city average.
- **Births to unmarried women.** During the 1990s, the percentage of Charlotte births to unmarried women remained substantially below the 50-city average. In 1998, approximately 34 percent of births in Charlotte were to unmarried women, compared with 43 percent of births in the 50 largest cities.
- **Low maternal education.** Despite minor fluctuations over the 1990-1998 period, the proportion of Charlotte births to women with less than 12 years of education were similar in 1990 and 1998 at around 18 percent. Charlotte was consistently below the 50-city average on this indicator throughout the 1990s.

- **Late or no prenatal care.** The share of Charlotte births to women who received late or no prenatal care fell from 4 percent in 1990 to 3 percent in 1994 and remained stable thereafter. Charlotte remained below the 50-city average on this indicator throughout the nine-year period.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Charlotte experienced a striking decline in the percentage of births to women who smoked during pregnancy, from 16 percent in 1990 to 9 percent in 1998. This change mirrored a similar downward trend among the 50 largest cities as a whole. However, births to women who smoked during pregnancy remained less common in Charlotte than in the 50 largest cities overall.
- **Low-birthweight births.** The percentage of Charlotte births that were low-birthweight remained relatively stable, between 9 percent and 10 percent, during the 1990s. The 50-city average remained steady at 9 percent during this time.
- **Preterm births.** A slight reduction in the share of Charlotte births that were preterm, from more than 13 percent in 1990 to less than 12 percent in 1996 through 1998, brought Charlotte just below the 50-city average by the end of the nine-year period.

In summary, when compared with the 1998 50-city average, Charlotte's children got off to a healthier start to life on six measures. Moreover, during the 1990-1998 period, the city experienced substantial declines in the percentages of births to mothers who smoked during pregnancy and births to teenagers. There were also reductions in the proportions of births to mothers who received late or no prenatal care, births to unmarried women, and preterm births.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Baltimore, MD	20.9	20.8	20.3	21.5	21.9	22.1	22.4	22.8	22.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Baltimore, MD	34.0	34.6	31.9	26.2	26.5	23.7	23.5	25.8	25.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Baltimore, MD	59.1	62.1	60.8	64.6	67.8	67.7	67.6	68.8	70.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Baltimore, MD	33.8	34.4	33.2	33.9	34.3	32.9	32.9	33.1	32.4
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Baltimore, MD	7.1	7.2	6.9	7.5	6.9	5.9	5.7	5.8	5.9
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Baltimore, MD	23.4	22.2	22.2	20.3	17.9	18.3	17.2	14.8	15.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Baltimore, MD	12.6	13.8	13.9	13.8	13.6	13.8	14.3	14.1	14.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Baltimore, MD	17.8	18.3	17.9	18.7	18.2	18.6	18.7	18.3	18.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,046	3,815	3,504	3,310	3,207	2,931	2,839	2,512
	Black non-Hispanic	9,091	9,273	8,844	8,466	8,061	7,389	7,163	6,911
	Hispanic	82	77	114	109	91	95	111	148
	Other	1,164	658	567	390	282	257	196	212
	Total	14,383	13,823	13,029	12,275	11,641	10,648	9,767	9,811

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Boston, MA

The yearly number of births in Boston decreased during the 1990s, from 10,347 in 1990 to 7,888 in 1998. This decline was particularly pronounced among whites and blacks. The proportion of births to Hispanics increased over this period, from 18 percent in 1990 to 22 percent in 1998.*

Over the 1990-1998 period, Boston experienced a striking reduction in the percentage of teen births to young women who were already mothers (see figure). Other notable changes during this time include sizable drops in the percentages of births to mothers with less than 12 years of education and births to mothers who smoked during pregnancy.

More specifically:

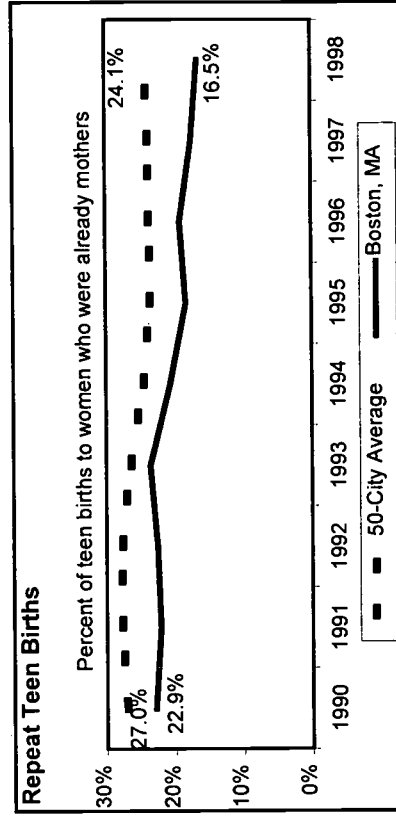
- **Teen births.** The percentage of births to teenagers in Boston remained relatively stable and well below the average for the 50 largest cities throughout the 1990-1998 period. In both 1990 and 1998, 11 percent of Boston births were to teens, compared with 15 percent of births in the 50 largest cities.
- **Repeat teen births.** During the 1990s, there was a marked overall decrease in the share of Boston teen births to young women who already had a child, from 23 percent in 1990 to 17 percent in 1998. Throughout the nine-year period, the percentage of Boston teen births that were repeat births remained below the 50-city average.
- **Births to unmarried women.** The proportion of Boston births to unmarried women rose during the early 1990s, from 45 percent in 1990 to 49 percent in 1994, and then returned to 45 percent in 1998. In contrast, the 50 largest cities as a group experienced a sustained increase in the percentage of births to unmarried women during this time. Despite these trends, Boston remained above the 50-city average throughout the nine-year period.
- **Low maternal education.** From 1990 to 1992, 27 percent of Boston births were to women with less than 12 years of education. The percentage then decreased markedly to 21 percent in 1997 and 1998. This substantial drop from 1990 to 1998 outpaced the downward trend of the 50 largest cities as a group.
- **Late or no prenatal care.** Births to women who received late or no prenatal care ranged between 3 percent and 5 percent of Boston births during the 1990s. Boston experienced a slight overall decline on this

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

measure between 1996 and 1998 and was below the 50-city average throughout the nine-year period.**

- **Smoking during pregnancy.** The abrupt change in the percentage of births to mothers who smoked during pregnancy from 1992 to 1993 probably reflects the effects of state anti-smoking legislation passed in 1992. Boston saw a notable drop in maternal smoking thereafter, from 12 percent in 1993 to 8 percent in 1998.
- **Low-birthweight births.** Throughout the 1990-1998 period, the proportion of low-birthweight births stayed at around 9 percent in both Boston and the 50 largest cities as a whole.
- **Preterm births.** Over the 1990-1998 period, 10 to 13 percent of Boston births were preterm. In 1998, 12 percent of births in Boston were preterm, compared with 13 percent of births in the 50 largest cities.

In summary, when compared with the 50-city average, Boston's children got off to a healthier start to life on six of eight indicators in 1998. In addition, Boston saw substantial decreases during the 1990s in the proportions of teen births that were repeat births, births to women with less than 12 years of education, and births to women who smoked during pregnancy.



** A more accurate method for calculating this statistic was introduced in 1996. This introduces a temporary discontinuity in the trends in prenatal care receipt. See Appendix 2 for more details.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Charlotte, NC	15.2	14.2	14.2	12.5	12.1	11.8	11.8	10.9	10.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Charlotte, NC	28.4	28.7	31.4	26.2	20.7	19.7	20.8	27.3	26.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Charlotte, NC	35.3	37.2	37.4	36.0	34.8	32.2	32.3	31.9	33.7
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Charlotte, NC	18.2	19.2	20.8	18.6	17.2	16.5	16.6	16.1	17.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Charlotte, NC	4.4	4.2	3.5	2.8	2.6	2.3	2.6	2.5	2.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Charlotte, NC	15.8	13.5	13.5	12.0	12.8	11.6	10.5	10.0	9.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Charlotte, NC	9.4	9.9	9.4	9.7	10.1	9.5	9.0	9.5	9.5
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Charlotte, NC	13.5	13.2	12.6	12.8	12.9	12.9	11.6	11.6	11.6
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,050	4,104	3,781	3,842	3,907	4,746	4,778	4,819
	Black non-Hispanic	2,973	3,074	2,940	2,922	2,716	2,913	3,020	3,244
	Hispanic	94	97	110	150	168	432	548	778
	Other	148	177	209	262	284	345	367	454
	Total	7,265	7,452	7,040	7,176	7,075	8,436	8,713	9,295

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Chicago, IL

There was a notable reduction in the yearly number of births in Chicago, from 60,246 in 1990 to 51,494 in 1998. At the same time, there was a rise in births to Hispanics, who accounted for 34 percent of Chicago births in 1998, compared with 26 percent in 1990.*

Chicago experienced a number of improvements in measures of a healthy start to life during the 1990s, including notable declines in the percentage of births to mothers who smoked during pregnancy (see figure) and in the proportion of teen births to young women who already had a child.

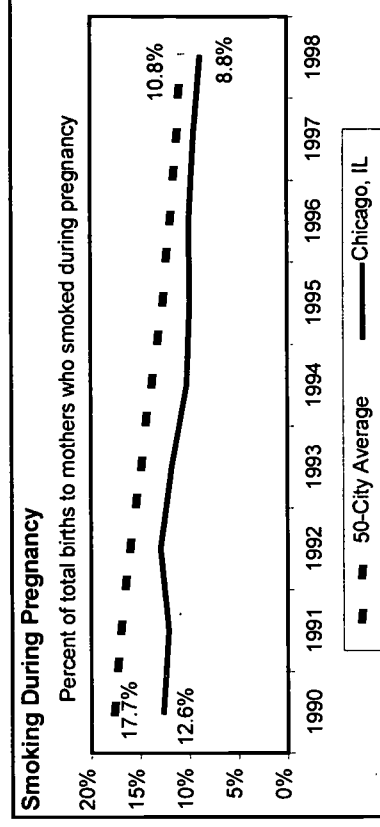
More specifically:

- **Teen births.** Teen births remained markedly more common in Chicago than in the 50 largest cities as a group throughout the 1990s. In 1998, teens accounted for 18 percent of births in Chicago, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** Chicago experienced a decline in the proportion of teen births to young women who were already mothers, from a high of 33 percent in 1992 to 28 percent in 1998—a change that paralleled the downward trend in the 50 largest cities as a whole. Repeat teen births were consistently more common in Chicago than in the 50 cities as a whole.
- **Births to unmarried women.** The proportion of Chicago births to unmarried women remained markedly above the 50-city average during the 1990-1998 period. In 1998, unmarried women accounted for 53 percent of births in Chicago, compared with 43 percent in the 50 largest cities.
- **Low maternal education.** During the 1990s, births to women with less than 12 years of education made up a larger share of births in Chicago than in the 50 largest cities as a whole. In 1998, 36 percent of Chicago births were to mothers with less than 12 years of education, compared with a 50-city average of 27 percent.
- **Late or no prenatal care.** Chicago saw a reduction in the proportion of births to women who received late or no prenatal care from 8 percent in 1990 to 6 percent in 1998. This change mirrored the downward trend in the 50 largest cities as a group.
- **Smoking during pregnancy.** The proportion of births to women who smoked during pregnancy was between 12 percent and 13 percent from

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

1990 to 1992 and then declined to 9 percent in 1998. Throughout the 1990s, smoking during pregnancy was notably less prevalent in Chicago than in the 50 largest cities overall.

- **Low-birthweight births.** The percentage of Chicago births that were low-birthweight remained relatively stable and slightly above the 50-city average during the 1990-1998 period. In 1998, 10 percent of births in Chicago were low-birthweight, compared with 9 percent in the 50 largest cities.
 - **Preterm births.** Preterm births accounted for a steady share of Chicago births during the 1990s – and were somewhat more prevalent in Chicago than in the 50 largest cities as a group. In 1998, preterm births made up 15 percent of births in Chicago, compared with 13 percent in the 50 largest cities.
- In summary, Chicago experienced a number of improvements in measures of a healthy start to life. These included drops in the share of teen births that were repeat births and in the percentage of all births to mothers who smoked during pregnancy. Further, the proportion of Chicago births to women who smoked during pregnancy remained below the 50-city average throughout the 1990-1998 period. However, the percentages of births to teens, to unmarried women, and to women with less than 12 years of education were consistently higher than the respective 50-city averages.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Chicago, IL	19.1	19.0	18.7	18.6	18.8	18.7	18.4	18.1	18.0
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Chicago, IL	31.9	32.6	33.0	32.5	30.3	30.4	29.2	28.7	27.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Chicago, IL	54.4	54.7	55.8	56.3	56.0	54.8	53.9	53.1	53.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Chicago, IL	37.4	37.4	37.9	37.9	38.3	39.6	37.8	37.2	36.4
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Chicago, IL	8.2	8.3	7.5	6.9	6.7	6.9	6.8	6.6	6.4
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Chicago, IL	12.6	12.1	12.9	11.8	10.2	9.9	9.9	9.5	8.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Chicago, IL	10.5	10.9	10.7	11.2	10.9	10.7	10.6	10.3	10.4
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Chicago, IL	15.0	15.3	15.5	15.4	15.3	14.9	14.6	14.8	14.6
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	13,732	13,325	12,448	11,923	11,442	10,982	10,445	10,611
	Black non-Hispanic	27,703	27,794	28,041	27,780	26,307	23,415	21,356	21,294
	Hispanic	15,490	16,212	16,647	17,217	17,450	17,923	17,287	17,528
	Other	3,321	3,078	2,358	2,117	2,139	2,053	2,066	2,061
	Total	60,246	60,409	59,494	59,037	57,338	52,841	51,154	51,494

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Cleveland, OH

The yearly number of births in Cleveland declined 20 percent from 11,196 in 1990 to 8,963 in 1998, reflecting reductions for both whites and blacks. In 1998, blacks accounted for just over half of Cleveland's births, while whites accounted for about 35 percent.*

During the 1990-1998 period, Cleveland experienced a considerable drop in the proportion of births to mothers who smoked during pregnancy. However, when compared with the 1998 50-city average, Cleveland's children got off to a less healthy start to life on all eight measures, including the percentage of births to unmarried women (see figure).

More specifically:

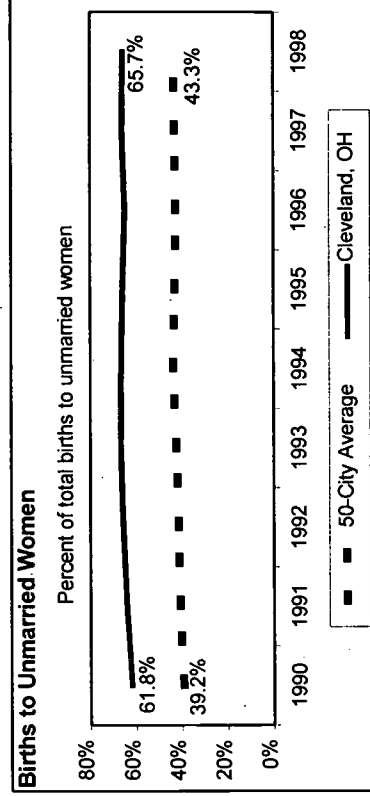
- **Teen births.** Teen births consistently made up a larger share of births in Cleveland than in the 50 largest cities during the 1990s. Throughout the period, teenagers accounted for 21 percent of births in Cleveland, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** The percentage of teen births to young women who were already mothers was slightly lower in 1998 (28 percent) than in 1990 (30 percent), despite a temporary increase in the early 1990s. The percentage of Cleveland teen births that were repeat births remained higher than the 50-city average throughout the period.
- **Births to unmarried women.** Births to unmarried women became a larger share of Cleveland births during the 1990s, rising from 62 percent in 1990 to 66 percent in 1992 and remaining stable thereafter. The percentage of births to unmarried women remained substantially higher than the 50-city average throughout the 1990-1998 period.
- **Low maternal education.** There was a small overall decline in the percentage of births to mothers with less than 12 years of education, from 36 percent in 1990 to 33 percent in 1998. This change slightly narrowed the gap between Cleveland and the 50-city average.
- **Late or no prenatal care.** It is not possible to interpret the trends in this indicator because of incomplete reporting of this information in Ohio.** In 1997 and 1998, however, the number of births to mothers who reported receiving late or no prenatal care was more than 50 percent higher than in 1996.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** See Appendix 2 for more details.

- **Smoking during pregnancy.** Cleveland experienced a dramatic decline in smoking during pregnancy between 1990 and 1998. The proportion of total births to Cleveland mothers who smoked fell from 33 percent in 1990 to 19 percent in 1998. This change mirrored the downward trend in the 50 largest cities as a group and narrowed the gap between Cleveland and the 50-city average.
- **Low-birthweight births.** The proportion of Cleveland babies that were low-birthweight remained both relatively stable and above the 50-city average during the 1990-1998 period. In 1998, low-birthweight babies made up 11 percent of births in Cleveland, compared with 9 percent in the 50 largest cities.
- **Preterm births.** Preterm births were more prevalent in Cleveland than in the 50 largest cities overall during the 1990s. In 1998, 15 percent of babies in Cleveland were preterm, compared with 13 percent in the 50 largest cities.

In summary, Cleveland experienced a substantial reduction during the 1990s in the percentage of births to mothers who smoked during pregnancy, narrowing the gap with the 50-city average. Throughout this time, however, the children of Cleveland got off to a less healthy start to life on all eight indicators, when compared with the 50-city average.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Cleveland, OH	21.3	20.4	20.3	20.8	20.3	20.8	20.7	20.5	20.7
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Cleveland, OH	30.4	32.8	33.2	32.3	28.4	27.2	26.5	27.7	28.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Cleveland, OH	61.8	64.0	65.8	66.6	66.5	65.8	64.8	65.9	65.7
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Cleveland, OH	36.0	37.4	35.8	36.2	33.7	32.5	32.3	32.4	33.3
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Cleveland, OH**	10.1	10.7	11.0	9.3	8.5	7.8	6.5	9.7	10.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Cleveland, OH	33.3	31.5	28.5	26.8	25.0	19.9	19.6	19.2	18.6
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Cleveland, OH	12.0	12.9	12.6	12.6	12.0	12.6	11.7	11.5	11.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Cleveland, OH	15.7	16.0	15.8	18.3	15.5	15.8	14.8	15.5	15.4
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,514	4,333	4,036	3,825	3,597	3,493	3,396	3,152
	Black non-Hispanic	6,026	6,180	6,144	5,975	5,485	5,220	4,972	4,719
	Hispanic	540	599	590	575	571	565	621	634
	Other	116	117	141	159	104	170	495	443
	Total	11,196	11,229	10,911	10,534	9,852	9,496	9,301	8,963

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text and Appendix 2.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Colorado Springs, CO

The yearly number of births in Colorado Springs rose from 5,575 in 1990 to 6,389 in 1998. This increase was most evident among Hispanics, who accounted for 15 percent of Colorado Springs births in 1998, compared with 10 percent in 1990.

During the 1990-1998 period, compared with the 50-city average, the children of Colorado Springs got off to a healthier start to life on most measures, including the share of births to women with less than 12 years of education (see figure). The city also saw a large reduction in the proportion of births to mothers who smoked during pregnancy and a notable rise in the percentage of births to unmarried women.

More specifically:

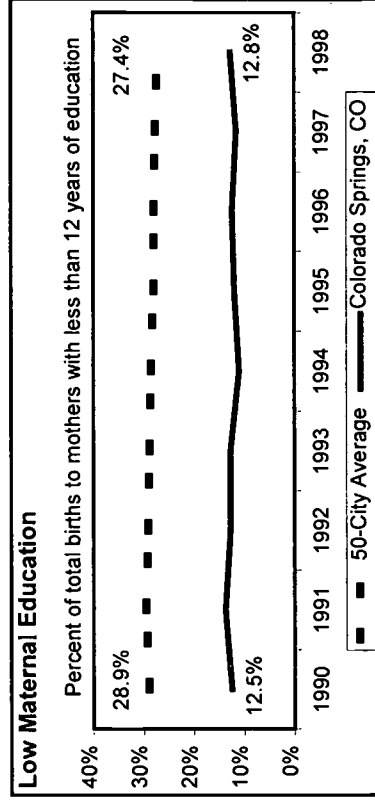
- **Teen births.** Teen births became a larger share of total Colorado Springs births during the 1990s. While teenagers accounted for 11 percent of births in 1990, they accounted for 13 percent in 1998. Despite this increase, Colorado Springs remained below the average for the 50 largest cities throughout the nine-year period.
- **Repeat teen births.** The percentage of teen births to women who already had a child remained relatively stable from 1990 to 1998, despite a downward trend among the 50 largest cities as a group. In 1998, 20 percent of Colorado Springs teen births were repeat births, compared with 24 percent in the 50 largest cities.
- **Births to unmarried women.** During the 1990-1998 period, Colorado Springs saw a substantial increase in the share of births to unmarried women, from 19 percent in 1990 to 27 percent in 1998. Nonetheless, births to unmarried women remained less common in Colorado Springs than in the 50 largest cities overall in 1998.
- **Low maternal education.** The share of births to women with less than 12 years of education remained dramatically below the 50-city average throughout the 1990-1998 period. In 1998, births to mothers with less than 12 years of education accounted for 13 percent of births in Colorado Springs, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** The percentage of Colorado Springs births to mothers who received late or no prenatal care increased from 3 percent in 1990 to 5 percent in 1993 and then remained stable at 4 percent through 1998. Although the 50 largest cities as a group saw a

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

decrease on this measure during the nine-year period, Colorado Springs remained below the 50-city average in 1998.

- **Smoking during pregnancy.** Colorado Springs saw a dramatic drop in the proportion of Colorado Springs births to mothers who smoked during pregnancy, from 19 percent in 1990 to 12 percent in 1998. In 1998, Colorado Springs was slightly above the 50-city average of 11 percent.
- **Low-birthweight births.** The share of low-birthweight births in Colorado Springs remained stable and on par with the average for the 50 largest cities during the 1990s. In both 1990 and 1998, approximately 9 percent of babies were low-birthweight both in Colorado Springs and in the 50 largest cities as a group.
- **Preterm births.** Between 8 percent and 11 percent of Colorado Springs births were preterm during the 1990s. At 11 percent in 1998, the percentage of preterm births in Colorado Springs was below the 50-city average of 13 percent.

In summary, when compared with the 50-city average in 1998, the children in Colorado Springs got off to a healthier start to life on six measures. Moreover, the city saw a marked drop in the percentage of births to women who smoked during pregnancy. During the same time, there was also a sizable rise in the share of births to unmarried women, as well as smaller increases in the shares of births to mothers receiving late or no prenatal care and births to teenagers.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Colorado Springs, CO	11.3	12.3	11.9	11.9	12.3	12.8	12.3	12.1	12.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Colorado Springs, CO	20.4	22.3	22.0	20.2	19.7	16.4	18.1	17.0	19.7
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Colorado Springs, CO	19.2	21.5	21.1	23.5	21.6	22.8	24.6	25.6	27.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Colorado Springs, CO	12.5	13.7	12.7	12.7	11.0	12.0	12.4	11.6	12.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Colorado Springs, CO	3.4	4.2	4.0	4.7	4.0	4.3	3.7	3.5	4.2
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Colorado Springs, CO	19.3	17.6	12.8	13.4	11.7	12.2	12.6	12.0	11.7
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Colorado Springs, CO	8.7	9.8	9.4	9.0	8.6	7.8	8.5	9.4	9.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Colorado Springs, CO	10.0	11.0	10.3	9.9	9.8	9.9	7.7	9.3	10.8
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,256	4,303	4,376	4,391	4,708	4,661	4,727	4,578
	Black non-Hispanic	545	564	584	579	592	594	529	540
	Hispanic	568	627	661	655	753	787	873	875
	Other	206	198	226	203	240	260	269	246
	Total	5,575	5,692	5,847	5,828	6,293	6,302	6,380	6,389

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Columbus, OH

The yearly number of births in Columbus remained relatively stable over the 1990-1998 period. There were 11,328 births in 1990 and 11,296 in 1998. Whites and blacks accounted for the majority of Columbus births throughout this time. In 1998, 64 percent of births were to whites and 28 percent were to blacks. Births to Hispanics increased during this time, accounting for almost 3 percent of Columbus births in 1998, compared with just 1 percent in 1998.

During the 1990s, Columbus saw substantial reductions in the proportion of teen births to young women who were already mothers and in the percentage of births to women who smoked during pregnancy (see figure). During the same period, there was also a striking increase in the share of births to unmarried women.

More specifically:

- **Teen births.** During the 1990s, the proportion of births to teenagers remained relatively stable and similar to the average for the 50 largest cities. In 1998, 15 percent of births were to teens in both Columbus and the 50 largest cities overall.
- **Repeat teen births.** There was an overall decrease in the share of Columbus teen births to young women who already had a child during the 1990s, from 29 percent in 1990 to 25 percent in 1998. In 1998, this percentage was not significantly different from the 50-city average of 24 percent.
- **Births to unmarried women.** Columbus experienced a striking increase in the proportion of births to unmarried women over the 1990-1998 period, from 38 percent in 1990 to 44 percent in 1998. The 50 largest cities as a group saw a similar increase during the 1990s.
- **Low maternal of education.** The share of Columbus births to women with less than 12 years of education remained substantially below the average of the 50 largest cities throughout the 1990s. In 1998, 22 percent of births in Columbus were to women with less than 12 years of education, compared with 27 percent of births in the 50 largest cities.
- **Late or no prenatal care.** It is not possible to interpret the trends in this indicator because of incomplete reporting of this information in Ohio.** In 1997 and 1998, however, the number of births to mothers

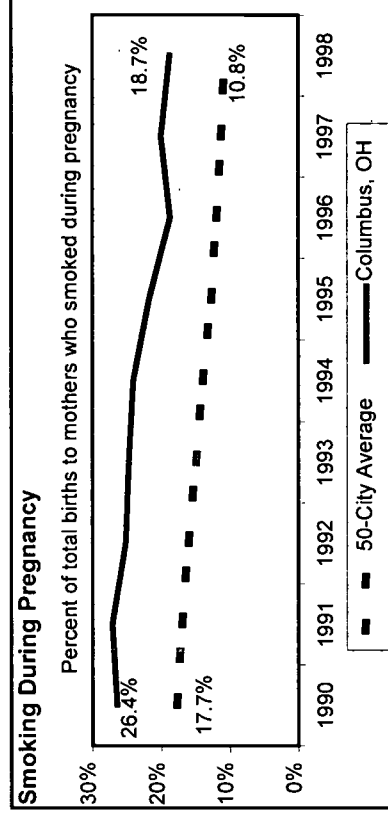
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** See Appendix 2 for more details.

who reported receiving late or no prenatal care was more than double the number in 1996.

- **Smoking during pregnancy.** The percentage of Columbus births to women who smoked during pregnancy decreased dramatically over the 1990s, from 26 percent in 1990 to 19 percent in 1998. This drop mirrored a similar downward trend among the 50 largest cities as a whole. However, smoking during pregnancy remained more common in Columbus than in the 50 largest cities overall throughout the nine-year period.
- **Low-birthweight births.** Throughout the 1990s, the share of Columbus births that were low-birthweight remained relatively stable and similar to the steady 50-city average of 9 percent.
- **Preterm births.** Both in Columbus and in the 50 largest cities as a group, the proportion of preterm births was stable at 13 percent throughout the 1990-1998 period.

In summary, Columbus saw striking drops in the proportions of teen births that were repeat births and births to women who smoked during pregnancy. However, during the same period, there was also a sharp increase in the percentage of births to unmarried women.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Columbus, OH	15.5	15.8	16.0	15.9	16.3	16.1	14.5	15.1	14.7
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Columbus, OH	29.1	28.7	28.0	27.6	24.1	21.9	23.9	22.1	24.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Columbus, OH	38.0	40.2	41.2	43.7	43.6	43.5	41.1	43.6	43.7
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Columbus, OH	23.1	24.1	23.1	23.3	22.4	21.4	19.5	21.8	21.7
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Columbus, OH**	4.4	4.5	3.8	3.3	3.5	2.9	4.8	9.8	11.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Columbus, OH	26.4	27.1	25.1	24.7	24.0	21.7	18.7	20.0	18.7
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Columbus, OH	8.2	8.8	8.6	9.1	8.9	9.3	9.2	9.1	8.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Columbus, OH	12.6	12.7	12.9	12.6	13.1	12.9	12.5	13.2	12.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	7,582	7,328	7,148	6,932	6,765	7,407	7,117	7,277
	Black non-Hispanic	3,314	3,318	3,357	3,301	3,160	2,990	3,238	3,212
	Hispanic	106	94	89	120	138	177	276	308
	Other	326	332	373	362	385	393	351	499
	Total	11,328	11,072	10,967	10,715	10,448	10,967	10,982	11,296

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text and Appendix 2.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Dallas, TX

The yearly number of births in Dallas rose from 21,159 in 1990 to 23,261 in 1998. Hispanics accounted for a steadily increasing share of total births over the nine-year period. Births were evenly divided among whites, blacks, and Hispanics in 1990.* By 1998, half of all births were to Hispanics, while the other half of births was split about evenly between blacks and whites.

Dallas experienced a number of other changes during the 1990s, the most striking of which was a decrease in the proportion of total births to mothers who received late or no prenatal care (see figure).

More specifically:

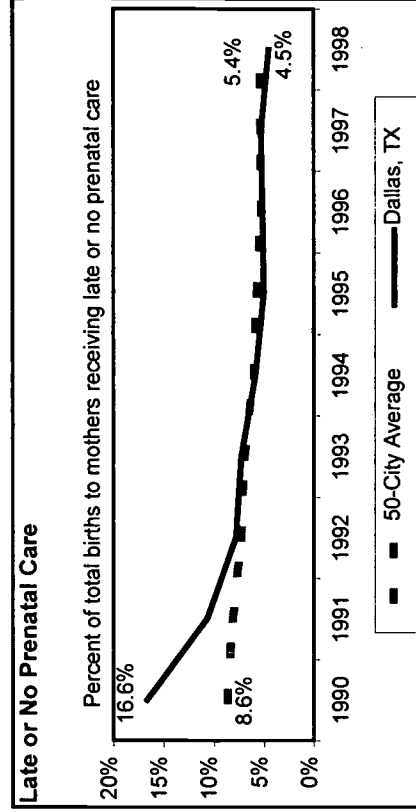
- **Teen births.** The percentage of Dallas births to teenagers remained above the 50-city average and basically stable throughout the 1990-1998 period. In 1998, teen births accounted for 17 percent of births in Dallas, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** There was an overall decline in the proportion of Dallas teen births to young women who were already mothers, from 32 percent in 1990 to 28 percent in 1998. This change mirrored a similar downward trend in the 50 largest cities as a group.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.** After 1994, Dallas experienced an increase in the percentage of births to unmarried women, from 40 percent in 1994 to 46 percent in 1998.
- **Low maternal education.** The proportion of Dallas births to women with less than 12 years of education increased from 39 percent in 1990 to 44 percent in 1995, and then remained steady between 1995 and 1998. These values remained substantially above the 50-city average throughout the 1990s.
- **Late or no prenatal care.** The percentage of Dallas births to women who received late or no prenatal care plummeted from nearly 17 percent in 1990 to 5 percent in 1995, and then remained stable at 5 percent well through 1998. This considerable improvement brought Dallas from above the 50-city average in 1990 to just below the 50-city average in 1998.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

- **Smoking during pregnancy.** The proportion of women who smoked during pregnancy fluctuated over the 1990-1998 period, but underwent an overall decline from 6 percent in 1990 to less than 4 percent in 1998. Throughout the 1990s, smoking during pregnancy was markedly less common in Dallas than in the 50 largest cities overall.
- **Low-birthweight births.** In Dallas, as in the 50 largest cities as a whole, low-birthweight babies made up a relatively constant share of births between 1990 and 1998. Eight percent of Dallas births were low-birthweight in 1998.
- **Preterm births.** In both Dallas and the 50 largest cities as a whole, preterm births accounted for 13 percent of births in both 1990 and 1998.

In summary, Dallas not only experienced a reduction in the proportion of births to mothers who smoked during pregnancy but was also below the 50-city average on this indicator throughout the 1990s. Moreover, there was a remarkable decline in the percentage of births to women who received late or no prenatal care as well as a decrease in the share of teen births that were repeat births. Increases in the percentages of births to unmarried women and to women with less than 12 years of education are also noteworthy.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Dallas, TX	17.8	18.3	18.4	18.1	17.9	17.9	17.2	17.0	17.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Dallas, TX	31.5	29.7	30.1	28.3	27.7	28.2	27.4	29.2	28.0
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Dallas, TX**	N.R.	N.R.	N.R.	N.R.	40.4	41.8	44.0	44.3	46.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Dallas, TX	39.3	40.4	40.8	42.6	43.0	43.7	44.1	43.8	44.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Dallas, TX	16.6	10.7	7.8	7.3	5.8	5.0	5.2	5.3	4.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Dallas, TX	5.9	6.1	5.3	3.8	6.0	4.8	4.2	3.7	3.6
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Dallas, TX	8.8	8.9	9.0	9.5	8.9	8.3	8.0	8.1	8.4
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Dallas, TX	12.6	12.1	11.2	11.1	12.5	11.7	11.7	12.0	12.7
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	6,842	6,671	6,371	6,038	5,859	5,627	5,361	5,336
	Black non-Hispanic	6,739	6,678	6,453	6,048	5,795	5,624	5,557	5,456
	Hispanic	6,973	7,486	7,926	8,631	8,905	9,501	10,343	11,549
	Other	605	637	627	719	715	746	730	920
	Total	21,159	21,472	21,377	21,436	21,274	22,257	22,621	23,261

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Denver, CO

The yearly number of births in Denver increased from 8,642 in 1990 to 9,841 in 1998. This rise was most evident among Hispanics, whose share of total births rose from 33 percent in 1990 to 46 percent in 1998.*

In addition, Denver underwent a number of changes in measures of a healthy start to life during the 1990s. Two dramatic improvements were reductions in the percentages of teen births to young women who were already mothers and births to women who smoked during pregnancy. However, the proportion of births to women with less than 12 years of education increased during this time (see figure).

More specifically:

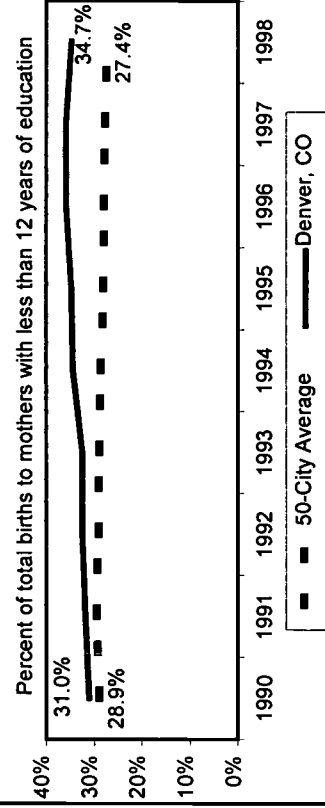
- **Teen births.** The proportion of Denver births to teenagers remained relatively stable and similar to the 50-city average throughout the 1990s. In both 1990 and 1998, 15 percent of births in both Denver and the 50 largest cities were to teens.
- **Repeat teen births.** Denver experienced a remarkable decline in the share of teen births to young women who were already mothers during the 1990s, from 29 percent in 1990 to 22 percent in 1998. The 50 largest cities as a whole also saw a decrease on this indicator from 1990 to 1998.
- **Births to unmarried women.** During the 1990-1998 period, the percentage of births to unmarried women remained relatively stable and consistently below the 50-city average. In 1998, births to unmarried women accounted for 36 percent of Denver births, compared with 43 percent of births in the 50 largest cities.
- **Low maternal education.** There was an increase in the share of Denver births to women with less than 12 years of education during the 1990s, from 31 percent in 1990 to 35 percent in 1998. This notable rise widened the gap between Denver and the 50-city average on this indicator.
- **Late or no prenatal care.** The percentage of births to mothers who received late or no prenatal care fluctuated between 6 percent and 8 percent of Denver births during the 1990-1998 period. Denver was above the 50-city average on this prenatal care indicator from 1992 through 1998.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Denver witnessed a dramatic reduction in the share of births to women who smoked during pregnancy in the 1990s, from 21 percent in 1990 to 11 percent in 1998. Above the 50-city average in 1990, Denver was on par with the average in 1998.
- **Low-birthweight births.** During the 1990s, the proportion of Denver babies that were low-birthweight remained stable and slightly above the average for the 50 largest cities. Throughout this time, 10 percent of births in Denver were low-birthweight, compared with 9 percent in the 50 largest cities.
- **Preterm births.** The percentage of babies that were preterm varied slightly over the 1990-1998 period, ranging from 11 percent to 13 percent of Denver births. In 1998, preterm births accounted for 13 percent of births in both Denver and the 50 largest cities.

In summary, Denver experienced substantial declines in the percentages of teen births that were repeat births and births to women who smoked during pregnancy over the 1990-1998 period. During the same time, the city saw a notable increase in the proportion of births to women with less than 12 years of education. The percentage of Denver births to unmarried women was consistently below the 50-city average throughout the nine-year period.

Low Maternal Education



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Denver, CO	14.6	16.2	16.1	16.3	15.9	15.8	15.7	15.8	15.3
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Denver, CO	28.9	26.7	26.5	23.6	20.9	20.6	24.7	22.6	22.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Denver, CO	37.0	38.4	36.4	38.3	38.7	37.2	36.1	36.7	36.0
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Denver, CO	31.0	31.8	32.5	32.5	34.4	34.7	35.8	35.9	34.7
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Denver, CO	6.9	6.1	7.7	8.0	8.3	7.7	6.6	6.3	6.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Denver, CO	21.0	20.7	17.3	17.2	14.5	15.1	14.4	11.5	11.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Denver, CO	10.1	10.3	10.2	10.3	10.3	10.4	9.8	9.9	9.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Denver, CO	11.7	11.3	11.3	12.0	12.1	11.8	12.5	12.6	12.7
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,170	4,146	4,025	3,866	3,702	3,537	3,650	3,782
	Black non-Hispanic	1,312	1,269	1,286	1,242	1,099	1,004	1,010	1,062
	Hispanic	2,812	3,012	3,313	3,268	3,454	3,730	4,031	4,570
	Other	348	403	401	371	359	404	391	427
	Total	8,642	8,830	9,025	8,747	8,614	9,175	9,310	9,841

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

There was a slight decrease in the yearly number of births in Des Moines over the 1990-1998 period, from 3,699 in 1990 to 3,393 in 1998. The small number of births to Hispanics more than tripled during this period, increasing from 3 percent in 1990 to 10 percent in 1998.**

When compared with the 1998 50-city average, the children of Des Moines got off to a healthier start to life on most measures, including the percentage of births to mothers with less than 12 years of education (see figure). Although there was a substantial drop in the proportion of births to mothers who smoked during pregnancy from 1990 to 1998, this percentage remained higher than the 50-city average.

More specifically:

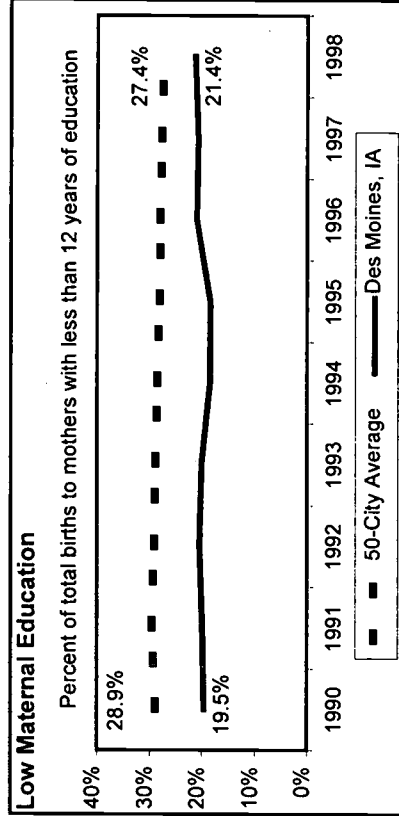
- **Teen births.** During the 1990s, the percentage of births to teenagers remained relatively stable in both Des Moines and the 50 largest cities overall. In 1990 and 1998, teen births accounted for 14 percent of Des Moines births and 15 percent of births in the 50 largest cities.
- **Repeat teen births.** The proportion of Des Moines teen births to young women who already had a child fluctuated between 17 percent and 26 percent during the 1990s. Repeat teen births accounted for a smaller percentage of births in Des Moines than in the 50 largest cities overall in 1998.
- **Births to unmarried women.** There was a sizable rise in the share of Des Moines births to unmarried women over the 1990-1998 period, from 33 percent in 1990 to 39 percent in 1998. Nonetheless, Des Moines remained below the 50-city average throughout this time.
- **Low maternal education.** During the 1990s, births to mothers with less than 12 years of education made up a substantially smaller share of births in Des Moines than in the 50 largest cities overall. In 1998, 21 percent of Des Moines births were to women with less than 12 years of education, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** The percentage of Des Moines births to mothers who received late or no prenatal care fluctuated somewhat during the 1990s, but remained below the 50-city average. In 1998, less than 4 percent of Des Moines births were to women receiving late or no prenatal care, compared with more than 5 percent of births in the 50 largest cities.

* Des Moines is not one of the 50 largest cities.

** Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Both Des Moines and the 50 largest cities as a group saw a substantial reduction in the proportion of births to mothers who smoked during pregnancy over the 1990-1998 period. However, Des Moines was consistently above the 50-city average throughout this time. In 1998, 24 percent of Des Moines births were to mothers who smoked during pregnancy, compared with 11 percent in the 50 largest cities.
- **Low-birthweight births.** The proportion of low-birthweight births in Des Moines remained relatively stable and consistently below the 50-city average throughout the 1990s. In 1990 and 1998, babies born at a low birthweight accounted for 7 percent of Des Moines births, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** There was an overall increase in the share of Des Moines births that were preterm during the 1990s, despite minor fluctuations throughout this time. In 1998, Des Moines was similar to the 50-city average, where 13 percent of births were preterm.

In summary, when compared with the 1998 50-city average, Des Moines children got off to a significantly healthier start to life on five of eight measures. In addition, the city experienced a marked decline in the proportion of births to women who smoked during pregnancy over the 1990-1998 period, although it remained well above the 50-city average. Other noteworthy changes include a sharp increase in the share of births to unmarried women, as well as smaller rises in the percentages of births to mothers receiving late or no prenatal care and births that were preterm.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Des Moines, IA	13.7	14.3	13.6	14.4	13.0	13.5	13.8	12.9	14.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Des Moines, IA	25.5	26.0	22.1	24.0	20.8	16.9	21.5	22.7	20.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Des Moines, IA	32.7	34.6	35.3	34.8	35.4	35.1	36.3	35.6	38.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Des Moines, IA	19.5	19.9	20.5	20.1	18.5	18.4	21.0	20.8	21.4
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Des Moines, IA	2.6	3.5	4.2	3.6	3.1	4.1	4.8	3.9	3.7
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Des Moines, IA	31.0	27.7	26.1	24.0	23.7	22.9	24.8	23.7	24.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Des Moines, IA	6.7	7.8	7.4	6.6	6.9	6.9	7.4	7.5	7.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Des Moines, IA	10.5	10.5	11.2	10.1	10.8	11.6	11.4	13.2	12.5
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	3,154	3,116	3,119	2,932	2,865	2,757	2,616	2,477	2,457
Black non-Hispanic	329	357	325	315	285	284	253	303	291
Hispanic	96	111	131	134	150	179	274	313	338
Other	120	132	137	150	148	266	389	313	307
Total	3,699	3,716	3,712	3,531	3,448	3,486	3,532	3,406	3,393

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in Detroit declined by nearly one-third, from 24,240 births in 1990 to 16,430 in 1998. The small share of births to Hispanics doubled during this time, from 3 percent in 1990 to 6 percent in 1998. Throughout the 1990s, blacks accounted for about 4 of every 5 births in Detroit.*

During the nine-year period, Detroit experienced a marked reduction in the share of births to mothers who smoked during pregnancy. However, when compared with the 1998 50-city average, Detroit's children got off to a less healthy start to life on all eight indicators—including the percentage of births to teens (see figure).

More specifically:

- **Teen births.** Teen births became a markedly smaller share of Detroit births during the 1990s, dropping from 24 percent in 1990 to 19 percent in 1998. However, teen births remained notably more common in Detroit than in the 50 largest cities as a whole, where 15 percent of births were to teens throughout the 1990s.
- **Repeat teen births.** The proportion of Detroit teen births to young women who already had a child increased from 30 percent in 1990 to 33 percent in 1992, and then declined to a low of 26 percent in 1998. This overall improvement paralleled the downward trend in the 50 largest cities overall.
- **Births to unmarried women.** The percentage of births to unmarried women is not displayed for 1990-1993 because the number of births to unmarried women in Michigan was underreported during these years.** The percentage of Detroit births to unmarried women fell from 75 percent in 1994 to 71 percent in 1998. Throughout this period, unmarried women accounted for a higher proportion of births in Detroit than in the 50 largest cities overall.

- **Low maternal education.** The share of births to women with less than 12 years of education decreased from a high of 39 percent in 1993 to 34 percent in 1998. This change slightly narrowed the sizable gap between Detroit and the 50-city average for this indicator.

- **Late or no prenatal care.** There was no clear trend during the 1990s in prenatal care in Detroit, despite a large improvement overall among the 50 largest cities as a group. In 1998, births to women who received late

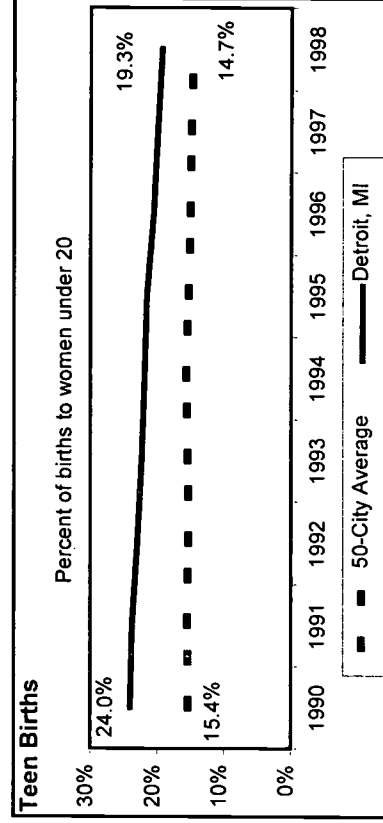
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** See Appendix 2 for more details.

or no prenatal care accounted for 9 percent of births in Detroit, compared with a 50-city average of 5 percent.

- **Smoking during pregnancy.** Like the 50 largest cities as a whole, Detroit saw a striking decline in smoking during pregnancy in the 1990s. Births to mothers who smoked during pregnancy accounted for 16 percent of Detroit births in 1998, compared with 24 percent in 1990. However, smoking during pregnancy was more common in Detroit than in the 50 largest cities as a whole.
- **Low-birthweight births.** The proportion of Detroit babies born at a low birthweight remained above the 50-city average throughout the 1990-1998 period. Thirteen percent of Detroit births were low-birthweight in 1998, compared with 9 percent in the 50 largest cities.
- **Preterm births.** During the 1990s, preterm births made up a relatively stable share of Detroit births, remaining well above the 50-city average. In 1998, 18 percent of births were preterm in Detroit, compared with 13 percent in the 50 largest cities.

In summary, Detroit showed notable declines in the percentage of births to women who smoked during pregnancy and in the proportion of teen births that were repeat births. Other changes include reductions in the percentages of births to teens and to women with less than 12 years of education. Throughout this time, the children of Detroit got off to a less healthy start to life on all eight measures, when compared with the 50-city average.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Detroit, MI	24.0	23.7	22.9	22.4	21.9	21.6	20.6	20.0	19.3
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Detroit, MI	30.1	32.9	33.5	33.1	31.6	27.9	28.1	26.7	26.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Detroit, MI**	N.R.	N.R.	N.R.	N.R.	75.3	73.6	72.4	71.6	71.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Detroit, MI	37.6	38.1	38.1	38.6	37.0	36.3	35.2	34.3	34.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Detroit, MI	8.5	8.2	8.1	8.9	8.5	7.9	6.5	7.2	8.8
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Detroit, MI	23.7	22.9	21.3	19.6	19.1	18.2	17.8	17.4	16.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Detroit, MI	14.0	14.4	14.2	13.6	13.7	13.5	12.8	12.6	13.4
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Detroit, MI	18.1	18.6	18.2	18.6	18.3	17.9	17.8	17.9	18.2
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,520	3,360	3,003	2,458	2,149	1,953	1,824	1,456
	Black non-Hispanic	19,452	19,138	17,700	16,704	15,960	14,285	13,434	13,507
	Hispanic	636	564	538	543	645	702	702	817
	Other	632	496	419	637	642	652	633	546
	Total	24,240	23,558	21,660	20,342	19,396	17,592	16,593	16,430

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

During the 1990s, the yearly number of births in El Paso remained relatively stable. There were 13,481 births in 1990 and 13,197 births in 1998. Throughout this time, Hispanics accounted for the majority of El Paso births; 83 percent of births were to Hispanics in 1990 and 1998.

El Paso experienced reductions over the 1990-1998 period in the shares of births to mothers who smoked during pregnancy, to women receiving late or no prenatal care, and to mothers with less than 12 years of education. However, the city saw a sharp increase in the proportion of teen births to young women who were already mothers (see figure).

More specifically:

- **Teen births.** Teen births made up a slightly larger share of births in El Paso than in the 50 largest cities as a whole during the 1990s. Births to teen mothers accounted for 16 percent to 17 percent of births in El Paso during the 1990s, compared with a steady 15 percent of births in the 50 largest cities.
- **Repeat teen births.** There was a dramatic increase in the proportion of El Paso teen births to young women who were already mothers over the 1990-1998 period, from 19 percent in the early 1990s to almost 28 percent by 1998. This rise was counter to the downward trend experienced by the 50 largest cities overall, and El Paso went from below the 50-city average in 1990 to above this average in 1998.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.*** From 1994 to 1998, El Paso remained well below the 50-city average on this measure.
- **Low maternal education.** During the 1990s, El Paso experienced a considerable decline in the percentage of births to mothers with less than 12 years of education, from a high of 43 percent in 1992 to 37 percent in 1998. In spite of this reduction, El Paso remained above the 50-city average throughout this time.

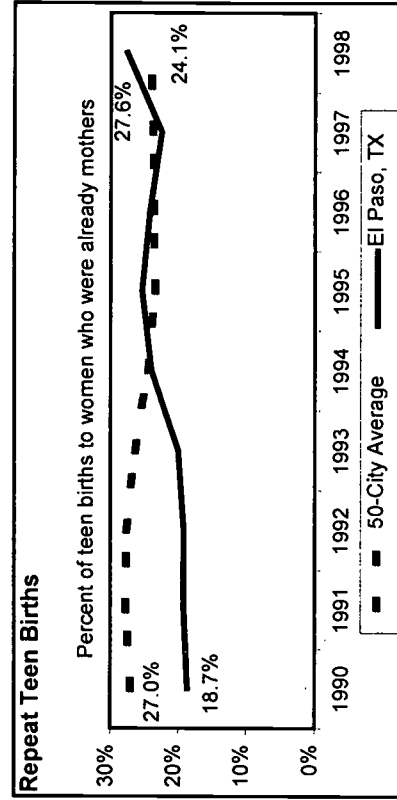
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Non-Hispanic white births may have been underreported in years prior to 1998. The 1998 figure reflects essentially complete reporting of this information. See Appendix 2 for more details.

*** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

- **Late or no prenatal care.** The percentage of births to women receiving late or no prenatal care fluctuated during the 1990s, although the net result was a notable decline between 1990 and 1998. In 1998, El Paso was substantially above the 50-city average; 13 percent of births in El Paso were to mothers receiving late or no prenatal care, compared with 5 percent in the 50 largest cities.
- **Smoking during pregnancy.** El Paso saw a reduction in the share of births to mothers who smoked during pregnancy from 1990 to 1998. In addition, maternal smoking was less common in El Paso than in the 50 largest cities overall throughout this time. In 1998, births to women who smoked during pregnancy accounted for 3 percent of El Paso births, compared with 11 percent of births in the 50 largest cities.
- **Low-birthweight births.** The percentage of babies born at a low birthweight in El Paso remained relatively stable and below the 50-city average during the 1990s. Throughout this time, low-birthweight babies accounted for 7 percent of El Paso births, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** Preterm births accounted for between 11 percent and 13 percent of El Paso births during the 1990-1998 period. El Paso remained just below the 50-city average throughout this time.

In summary, El Paso experienced both positive and negative changes in measures of a healthy start to life during the 1990s. There were substantial declines in the percentages of births to mothers who smoked during pregnancy, to mothers with less than 12 years of education, and to mothers receiving late or no prenatal care. On the other hand, there was a large increase in repeat teen births.



Trends In Key Indicators, 1990-1998

Indicator *	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
El Paso, TX	15.8	16.4	16.6	16.9	16.7	16.9	16.2	16.3	16.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
El Paso, TX	18.7	19.2	19.2	20.0	24.0	25.4	24.2	22.5	27.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
El Paso, TX**	N.R.	N.R.	N.R.	N.R.	29.3	31.4	32.1	30.8	33.0
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
El Paso, TX	42.3	42.8	43.1	42.6	41.3	41.2	40.2	38.2	36.6
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
El Paso, TX	16.4	17.4	17.5	15.0	12.8	13.3	12.4	10.4	12.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
El Paso, TX	5.2	4.9	4.5	4.2	3.2	2.6	2.6	3.0	3.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
El Paso, TX	6.9	7.2	6.6	6.8	6.6	7.2	7.1	7.2	7.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
El Paso, TX	10.7	11.0	11.3	11.3	11.6	11.7	11.5	12.5	11.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	1,877	1,772	1,816	1,712	1,648	1,528	1,346	1,875
	Black non-Hispanic	332	296	376	360	370	325	239	297
	Hispanic	11,143	11,055	11,874	12,180	11,949	11,875	11,717	10,892
	Other	129	130	131	141	117	142	122	131
	Total	13,481	13,253	14,197	14,393	14,084	13,870	13,132	13,197

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

N.R. = Not Reliable. See text, footnote * in text, and Appendix 2 for more details.

***See ** footnote in text and Appendix 2.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Fort Worth, TX

The yearly number of births in Fort Worth remained relatively stable over the 1990-1998 period. There were 9,632 births in 1990 and 9,886 births in 1998. During this time, there was a striking rise in Hispanic births and a decline in births to both whites and blacks. While births to Hispanics accounted for 28 percent of Fort Worth births in 1990, they accounted for more than 40 percent of births in 1998.*

During the 1990-1998 period, Fort Worth experienced substantial drops in the percentages of teen births to young women who were already mothers, births to mothers receiving late or no prenatal care, and births to women who smoked during pregnancy (see figure).

More specifically:

- **Teen births.** Between 17 percent and 18 percent of Fort Worth births were to teenage mothers during the 1990s. Teen births were more common in Fort Worth than in the 50 largest cities as a whole throughout this time.
- **Repeat teen births.** The share of Fort Worth teen births to young women who were already mothers fluctuated during the 1990s, but underwent a marked overall decline from 1990 to 1998. Repeat teen births accounted for 24 percent of teen births in 1998, compared with 32 percent in 1990. Fort Worth was on par with the 50-city average in 1998.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.** From 1994 to 1998, the proportion of Fort Worth births to unmarried women rose, from 31 percent to 38 percent.
- **Low maternal education.** Births to mothers with less than 12 years of education made up a substantially larger share of births in Fort Worth than in the 50 largest cities as a group throughout the 1990-1998 period. In 1998, 38 percent of births in Fort Worth were to women with less than 12 years of education, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** There was a dramatic reduction in the percentage of Fort Worth births to women receiving late or no prenatal

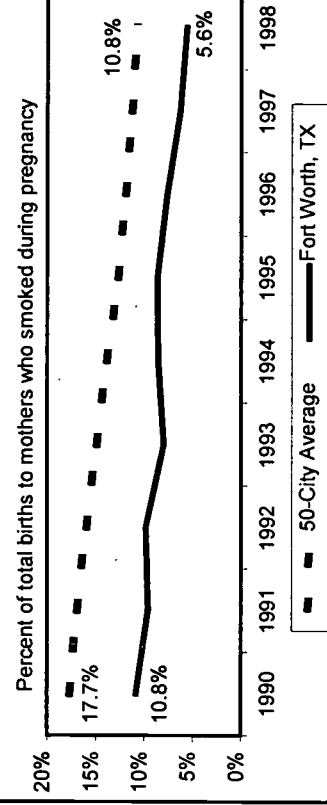
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.
** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

care during the 1990s, from 15 percent in 1990 to 8 percent in 1998. This drop brought Fort Worth closer to the 50-city average over the nine-year period.

- **Smoking during pregnancy.** Both Fort Worth and the 50 largest cities as a group experienced a striking drop in maternal smoking over the 1990-1998 period, with Fort Worth remaining substantially below the 50-city average throughout this time. In 1998, births to women who smoked during pregnancy accounted for 6 percent of Fort Worth births, compared with 11 percent in the 50 largest cities.
- **Low-birthweight births.** The proportion of Fort Worth babies born at a low birthweight remained relatively constant and just below the average for the 50 largest cities during the 1990s. In 1990 and 1998, low-birthweight births accounted for 8 percent of Fort Worth births, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** The share of preterm births in Fort Worth decreased from 13 percent in 1990 and 1991 to 10 percent in 1995 and then returned to 13 percent in 1997 and 1998. Fort Worth was on par with the 50-city average in both 1990 and 1998.

In summary, during the 1990s, Fort Worth saw striking drops in the proportions of births to mothers who smoked during pregnancy, teen births that were repeat births, and births to women receiving late or no prenatal care. However, there was also an increase in the percentage of births to women with less than 12 years of education during this time period.

Smoking During Pregnancy



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Fort Worth, TX	16.8	16.6	16.9	17.4	18.3	18.2	16.9	17.4	17.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Fort Worth, TX	31.9	30.1	26.8	24.9	22.2	24.8	26.5	28.0	24.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Fort Worth, TX**	N.R.	N.R.	N.R.	N.R.	31.3	33.6	35.0	36.5	37.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Fort Worth, TX	35.3	37.4	36.1	37.8	37.9	37.5	39.4	38.2	38.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Fort Worth, TX	14.9	16.3	13.2	11.4	8.7	7.6	6.7	7.9	7.7
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Fort Worth, TX	10.8	9.6	9.8	8.0	8.5	8.6	7.6	6.3	5.6
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Fort Worth, TX	7.6	7.8	7.6	8.3	7.9	7.3	8.0	8.1	8.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Fort Worth, TX	12.8	12.8	12.4	12.0	11.6	10.1	10.7	12.8	13.0
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	4,563	4,267	4,053	3,813	3,648	3,679	3,589	3,518	3,551
Black non-Hispanic	2,121	2,155	2,141	1,967	1,888	1,895	1,925	1,951	2,045
Hispanic	2,703	2,770	2,818	2,955	2,957	3,247	3,549	3,692	3,990
Other	245	248	243	269	281	287	314	327	300
Total	9,632	9,440	9,255	9,004	8,774	9,108	9,377	9,488	9,886

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in Fresno decreased from 9,996 in 1990 to 9,149 in 1998. This decline occurred among blacks and whites, while births to Hispanics increased. Hispanic births accounted for 51 percent of Fresno births in 1998, compared with only 38 percent in 1990.*

During the 1990s, Fresno experienced improvements in four of seven available measures a healthy start to life, including a sharp reduction in the proportion of births to mothers with less than 12 years of education (see figure). However, the percentages of births to teens, births to mothers with less than 12 years of education, and teen births that were repeat births remained above the 50-city average throughout 1990-1998.

More specifically:

- **Teen births.** Throughout the 1990s, teen births were more common in Fresno than in the 50 largest cities overall. In 1998, 18 percent of Fresno births were to teens, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** Fresno saw an overall reduction in the percentage of teen births to young women who already had a child, from 32 percent in 1990 to 29 percent in 1998. Despite this change, Fresno remained above the 50-city average throughout this time.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, 43 percent of births in both Fresno and the 50 largest cities were to unmarried women.
- **Low maternal education.** There was a marked decrease in the share of Fresno births to women with less than 12 years of education from 1990 to 1998. However, Fresno remained considerably above the 50-city average throughout this time. In 1998, 41 percent of births in Fresno were to women with less than 12 years of education, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** From 1990 to 1998, the share of births to women receiving late or no prenatal care fell by nearly half. Moreover, Fresno was below the 50-city average throughout this time. In 1998, 3

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

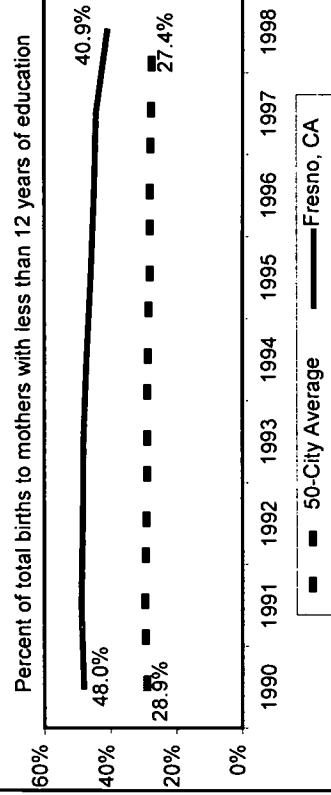
** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

percent of Fresno births were to women receiving late or no prenatal care, compared with 5 percent in the 50 largest cities.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** The percentage of Fresno births that were low-birthweight remained stable and below the 50-city average throughout the 1990s. In 1990 and 1998, low-birthweight babies accounted for 7 percent of births in Fresno, compared with 9 percent in the 50 largest cities.
- **Preterm births.** Fresno saw a reduction in the proportion of preterm births from 1990 to 1998. Preterm births accounted for only 10 percent of Fresno births in 1998, compared with 12 percent in 1990. Throughout this time period, Fresno was below the 50-city average for this measure.

In summary, Fresno experienced several improvements on measures of a healthy start to life, including drops in the percentages of teen births that were repeat births, births to mothers receiving late or no prenatal care, and preterm births. However, Fresno remained substantially above the 50-city average for the proportion of births to women with less than 12 years of education in 1998, despite a striking drop on this measure over the 1990-1998 period. Moreover, teen births were more common in Fresno than in the 50 largest cities as a whole throughout the 1990-1998 period.

Low Maternal Education



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Fresno, CA	17.2	17.1	17.1	18.0	18.2	18.2	18.6	19.1	17.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Fresno, CA	32.3	32.9	33.4	32.3	30.7	29.7	28.9	27.3	28.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Fresno, CA**	37.7	38.2	38.9	41.1	39.8	38.9	38.9	42.9	43.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Fresno, CA	48.0	48.8	48.3	48.1	47.1	45.9	45.0	44.2	40.9
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Fresno, CA	5.7	4.0	3.0	3.3	4.3	3.9	3.5	3.8	3.0
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Fresno, CA***	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Fresno, CA	7.0	7.1	7.7	6.9	7.3	7.1	6.9	7.1	7.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Fresno, CA	11.8	11.6	10.4	10.1	9.8	10.2	10.5	10.4	10.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,351	3,362	3,204	2,986	2,889	2,769	2,422	2,575
	Black non-Hispanic	883	884	877	935	871	821	755	758
	Hispanic	3,757	4,237	4,371	4,536	4,475	4,451	4,524	4,658
	Other	2,005	2,128	2,104	2,074	1,891	1,747	1,292	1,158
	Total	9,996	10,611	10,556	10,531	10,126	9,788	8,993	9,149

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

There was a 30 percent decrease in the yearly number of births in Hartford, from 3,244 in 1990 to 2,283 in 1998. During this time, births to Hispanics and blacks accounted for the majority of Hartford births. In 1998, 50 percent of births were to Hispanics and 39 percent were to blacks.

Over the 1990-1998 period, Hartford saw sizable drops in the proportions of births to mothers with less than 12 years of education, births to mothers who smoked during pregnancy, and preterm births. At the same time, there was a marked rise in the already high percentage of births to unmarried women and an overall increase in the share of births to mothers receiving late or no prenatal care. Moreover, the share of teen births remained substantially above the 50-city average throughout this time (see figure).

More specifically:

- **Teen births.** Teenagers accounted for an exceptionally high share of Hartford births during the 1990s. In 1998, 25 percent of Hartford births were to teens, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** There was no clear trend in the percentage of Hartford teen births to young women who already had a child from 1990 to 1998. In 1998, 26 percent of teen births in Hartford were repeat births, not significantly different from the 50-city average.
- **Births to unmarried women.** During the 1990s, the proportion of births to unmarried women increased and remained dramatically above the 50-city average.*** While births to unmarried women accounted for 78 percent of Hartford births in 1998, they accounted for 43 percent in the 50 largest cities.
- **Low maternal education.** The percentage of births to women with less than 12 years of education increased from 37 percent in 1990 to a high of almost 41 percent in 1994, and then decreased to 31 percent in 1998. In spite of this overall decline, Hartford remained above the 50-city average on this indicator throughout this period.
- **Late or no prenatal care.** During the 1990s, the number of Hartford births to mothers receiving late or no prenatal care dropped between

* Hartford is not one of the 50 largest cities.

** Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

*** Data on the racial/ethnic breakdown of Hartford births are less reliable in the early 1990s. In 1990, nearly 13 percent of the births were coded as unknown/not stated for Hispanic origin of the mother.

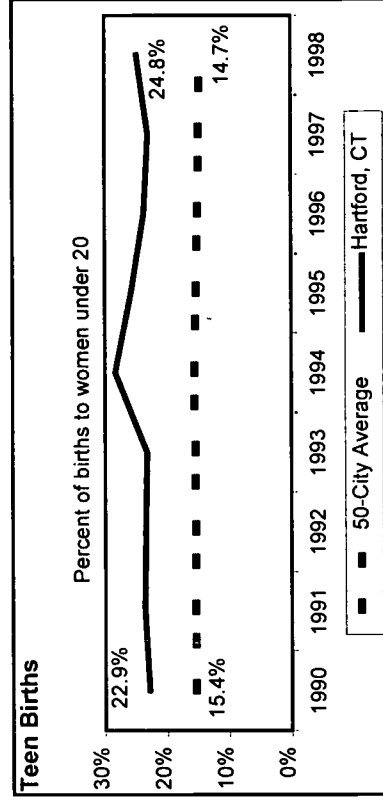
**** Connecticut began determining marital status by direct question in June 1998. Births to unmarried women may be somewhat overstated in all years. See Appendix 2 for more details.

1990 and 1997 and then more than tripled between 1997 and 1998. In 1998, 7 percent of births in Hartford were to women receiving late or no prenatal care, compared with 5 percent in the 50 largest cities.

- **Smoking during pregnancy.** There was a dramatic drop in the proportion of Hartford births to women who smoked during pregnancy, from almost 14 percent in 1990 to 7 percent in 1998. Hartford was below the 50-city average on this measure throughout the 1990s.
- **Low-birthweight births.** Low-birthweight births made up a larger percentage of births in Hartford than in the 50 largest cities as a whole throughout the 1990s. In 1990 and 1998, babies born at a low birthweight accounted for approximately 13 percent of Hartford births, compared with 9 percent of births in the 50 largest cities.

- **Preterm births.** The share of preterm births fluctuated during the 1990s, ranging from 12 percent to 17 percent of Hartford births. A substantial overall decrease on this measure from 1990 to 1998 essentially closed the gap with the 50-city average in 1998.

In summary, when compared with the 1998 50-city average, Hartford's children got off to a significantly less healthy start to life on five measures. This disparity was particularly pronounced for the proportions of births to unmarried women and to teens. In contrast, Hartford was below the 50-city average for the share of births to mothers who smoked during pregnancy throughout the 1990s—and this percentage decreased throughout this period. From 1990 to 1998, the city also saw reductions in the proportions of preterm births and births to mothers with less than 12 years of education. At the same time, there were increases in the percentages of births to mothers receiving late or no prenatal care and births to unmarried women.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Hartford, CT	22.9	23.6	23.5	23.2	28.3	25.8	23.7	23.0	24.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Hartford, CT	28.6	28.9	33.7	30.0	26.8	29.5	25.5	24.0	26.2
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Hartford, CT**	70.7	73.1	75.1	74.8	78.5	77.4	79.0	78.8	78.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Hartford, CT	37.4	38.2	37.0	38.3	40.5	37.8	35.9	33.3	31.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Hartford, CT	4.7	4.2	4.8	4.1	2.9	3.3	3.3	2.1	6.7
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Hartford, CT	13.6	12.2	14.1	12.5	10.2	11.2	10.5	8.9	7.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Hartford, CT	13.0	12.9	13.3	12.7	12.5	13.3	12.0	11.9	13.4
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Hartford, CT	17.1	14.6	15.6	16.0	14.7	15.8	12.0	15.3	14.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	351	385	324	311	207	236	230	199	187
Black non-Hispanic	1,084	1,175	1,190	1,078	927	857	894	866	892
Hispanic	1,363	1,289	1,341	1,239	1,185	1,127	1,066	1,054	1,133
Other	446	285	173	165	243	90	72	130	71
Total	3,244	3,134	3,028	2,793	2,562	2,310	2,262	2,249	2,283

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

See footnote ** in text and Appendix 2.

***See footnote *** in text and Appendix 2.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Honolulu, HI

The yearly number of births in Honolulu decreased by 20 percent over the 1990-1998 period. In 1990 there were 5,975 births; in 1998 there were 4,770. This decline was consistent across all racial-ethnic groups.* Over two-thirds of Honolulu births in 1998 were to Asian-Pacific Islanders.

Throughout this time period, the children of Honolulu got off to a healthier start to life on all eight measures, when compared with the 50-city average. Moreover, there were notable reductions in the percentages of total births to women who smoked during pregnancy and to women who received late or no prenatal care (see figure).

More specifically:

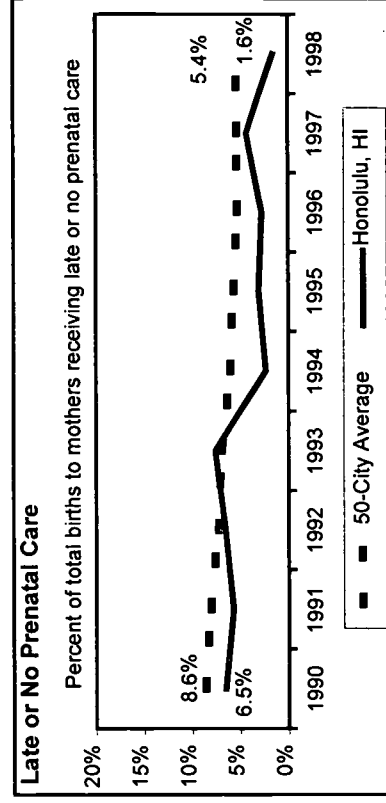
- **Teen births.** Teen births were markedly less common in Honolulu than among the 50 largest cities overall throughout the 1990s. Teenagers accounted for 8 percent of Honolulu births in 1990 and 7 percent in 1998, compared with a stable 50-city average of 15 percent.
- **Repeat teen births.** The percentage of Honolulu teen births to young women who were already mothers fluctuated during the 1990s, but underwent an overall decline between 1990 and 1998. The percentage of teen births that were repeat births was 14 percent in 1998, compared with 17 percent in 1990. This positive overall change mirrored the downward trend in the 50 largest cities as a group, and Honolulu remained below the 50-city average on this indicator throughout the 1990s.
- **Births to unmarried women.** The percentage of Honolulu births to unmarried women increased from 21 percent in 1990 to 25 percent in 1998. The 50 largest cities as a group experienced a similar upward trend, but Honolulu remained well below the 50-city average for this measure throughout the nine-year period.
- **Low maternal education.** Births to mothers with less than 12 years of education were much less common in Honolulu than in the 50 largest cities overall throughout the 1990s. These mothers accounted for only 9 percent of Honolulu births in 1998, compared with a 50-city average of 27 percent.
- **Late or no prenatal care.** Already well below the 50-city average, the percentage of Honolulu births to mothers who received late or no prenatal care, which stood at 6 percent in 1990, was less than 2 percent

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

in 1998. The decrease was irregular and was concentrated in two periods—1993-1994 and 1997-1998.

- **Smoking during pregnancy.** During the 1990s, the proportion of Honolulu births to mothers who smoked during pregnancy was cut in half. While 11 percent of Honolulu mothers smoked during pregnancy in 1990, only 5 percent did so in 1995 through 1998. Throughout this time, smoking during pregnancy was dramatically less common in Honolulu than in the 50 largest cities as a whole.
- **Low-birthweight births.** During the 1990-1998 period, the percentage of babies who were low-birthweight in Honolulu remained relatively stable. In both 1990 and 1998, 7 percent of Honolulu births were low-birthweight, compared with 9 percent in the 50 largest cities.
- **Preterm births.** The proportion of Honolulu births that were preterm remained lower than the 50-city average throughout the 1990s. In 1998, 11 percent of Honolulu births were preterm, compared with a 50-city average of 13 percent.

In summary, Honolulu's children got off to a healthier start to life in 1998 on all eight measures, when compared with the 50-city average. The city also experienced a number of improvements, including noteworthy declines in the proportions of births to women who smoked during pregnancy and to women who received late or no prenatal care.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Honolulu, HI	8.2	7.4	7.6	7.1	6.9	7.2	7.5	7.0	7.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Honolulu, HI	17.1	22.2	19.8	19.2	14.3	16.4	13.5	16.0	13.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Honolulu, HI	21.1	21.3	22.2	23.4	24.2	24.5	24.6	24.5	25.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Honolulu, HI	11.9	11.1	10.6	10.1	10.2	9.9	10.9	9.5	9.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Honolulu, HI	6.5	5.7	6.5	7.6	2.3	3.0	2.7	4.3	1.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Honolulu, HI	10.9	9.7	9.7	6.9	5.7	4.9	5.3	4.6	5.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Honolulu, HI	6.8	6.3	8.0	7.8	7.1	6.9	7.0	7.0	7.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Honolulu, HI	9.7	10.2	11.5	10.9	11.9	11.1	10.8	10.4	11.2
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	1,369	1,372	1,287	1,250	1,244	1,055	927	931
	Black non-Hispanic	216	188	202	198	181	134	159	158
	Hispanic	538	484	480	453	402	391	404	404
	Other	3,852	3,765	3,711	3,711	3,717	3,361	3,124	3,277
	Total	5,975	5,809	5,680	5,612	5,544	4,954	4,605	4,770

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Houston, TX

The yearly number of births in Houston increased from 39,959 in 1990 to 42,044 in 1998. This increase was due to a dramatic rise in births to Hispanics, who accounted for 51 percent of Houston births in 1998, compared with only 39 percent in 1990.* Births to both whites and blacks decreased over this period.

During the 1990-1998 period, Houston experienced striking reductions in the percentage of teen births to young women who were already mothers and in the proportions of all births to mothers who received late or no prenatal care and to mothers who smoked during pregnancy (see figure).

More specifically:

- **Teen births.** The proportion of Houston births to teens remained close to the 50-city average during the 1990s. Throughout this time, teen births accounted for 15 percent to 16 percent of Houston births, compared with a steady 15 percent of births in the 50 largest cities.
- **Repeat teen births.** Houston saw a substantial drop during the 1990s in the share of teen births to young women who were already mothers, from 29 percent in 1990 to 22 percent in 1998. This decline brought Houston from above the 50-city average in 1990 through 1993 to below the average for the remainder of the period.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.** From 1995 through 1998, the proportion of births to unmarried women in Houston remained steady at 38 percent, below the 50-city average of 43 percent.
- **Low maternal education.** During the 1990s, the proportion of Houston births to women with less than 12 years of education increased from 41 percent in 1990 to 44 percent in 1996 and then decreased to 42 percent in 1998. These values remained markedly above the 50-city average throughout this time.

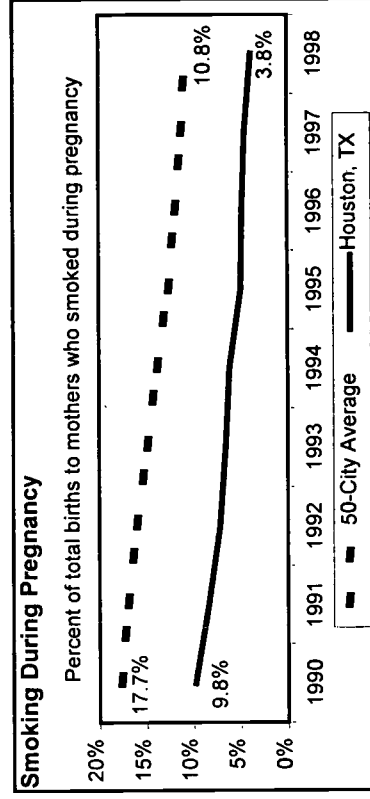
- **Late or no prenatal care.** There was a remarkable decrease in the percentage of Houston births to women who received late or no prenatal care, from a high of 13 percent in 1993 to just 5 percent in 1994. In 1995 through 1998, births to women who received late or no prenatal care accounted for 4 percent of Houston births, just below the 50-city average.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

- **Smoking during pregnancy.** Already well below the 50-city average in 1990, Houston experienced a dramatic drop in the proportion of births to women who smoked during pregnancy from 1990 to 1998. In 1998, 4 percent of births in Houston were to mothers who smoked during pregnancy, compared with 11 percent in the 50 largest cities.
- **Low-birthweight births.** The share of births that were low-birthweight in Houston remained stable and just below the 50-city average during the 1990-1998 period. Throughout this time, low-birthweight babies accounted for 8 percent of Houston births, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** In both Houston and the 50 largest cities, preterm births accounted for 13 percent of births throughout the 1990s.

In summary, Houston saw remarkable declines in the percentage of births to mothers who smoked during pregnancy, in the proportion of births to mothers who received late or no prenatal care, and in the share of teen births that were repeat births. Furthermore, when compared with the 1998 50-city average, the children of Houston got off to a healthier start to life on both of these measures. However, the percentage of births to women with less than 12 years of education remained substantially above the 50-city average.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Houston, TX	16.1	16.2	16.2	15.6	16.1	15.4	15.5	15.6	15.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Houston, TX	29.5	28.0	29.1	28.2	21.5	20.5	22.5	23.6	22.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Houston, TX**	N.R.	N.R.	N.R.	N.R.	35.4	37.6	37.8	37.5	37.7
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Houston, TX	41.0	42.4	43.1	42.5	43.5	43.3	43.7	43.8	42.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Houston, TX	11.4	12.9	12.7	12.9	5.0	4.3	3.9	3.8	4.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Houston, TX	9.8	8.4	7.2	6.6	6.2	5.0	4.8	4.5	3.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Houston, TX	8.1	8.0	7.9	8.0	7.9	7.7	7.7	7.8	7.9
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Houston, TX	13.2	12.9	12.6	13.4	12.8	12.7	12.6	12.7	13.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	11,300	10,910	9,978	9,673	9,199	9,093	8,884	8,476
	Black non-Hispanic	11,473	11,155	11,284	11,005	10,313	9,863	9,826	9,923
	Hispanic	15,478	16,948	17,659	18,170	18,492	19,330	20,676	21,362
	Other	1,708	1,859	1,891	2,086	2,042	2,207	2,287	2,283
	Total	39,959	40,872	40,812	40,934	40,046	40,493	41,673	42,044

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Indianapolis, IN

Indianapolis experienced a decline in the yearly number of births, from 14,776 in 1990 to 13,464 in 1998. This decrease was most evident among whites, who accounted for 66 percent of Indianapolis births in 1998, compared with 71 percent of births in 1990.*

Over the 1990-1998 period, Indianapolis saw striking reductions in the proportion of teen births to young women who were already mothers and in the percentage of births to women who received late or no prenatal care. However, there was also a substantial increase in the percentage of births to unmarried women. When compared with the 50-city average, Indianapolis' children got off to a healthier start to life throughout the 1990s in the share of births to women with less than 12 years of education (see figure).

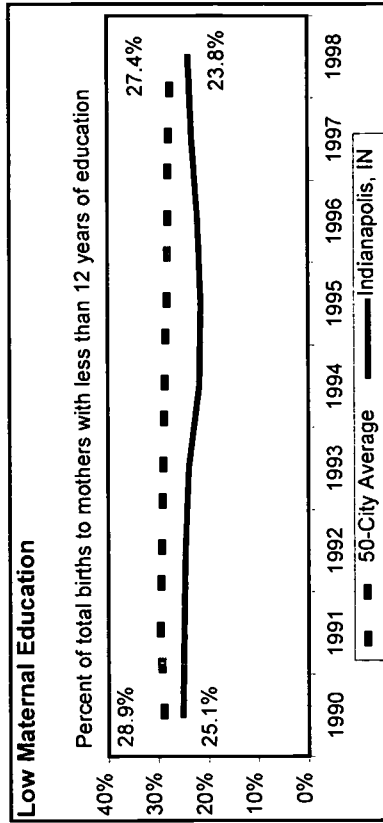
More specifically:

- **Teen births.** The percentage of Indianapolis births to teenagers decreased from 17 percent in 1990 to 15 percent in 1998. In 1998, Indianapolis was just above the 50-city average on this measure.
- **Repeat teen births.** The proportion of teen births to young women who already had a child decreased dramatically during the first part of the 1990s, from 28 percent in 1990 to 19 percent in 1995, and then increased to 24 percent by 1998. Just above the average for the 50 largest cities in the early 1990s, the share of Indianapolis repeat teen births was equivalent to the 50-city average in 1998.
- **Births to unmarried women.** Indianapolis experienced a dramatic increase in the share of births to unmarried women during the 1990s, from 37 percent in 1990 to 43 percent in 1998. This rise outpaced a similar upward trend among the 50 largest cities as a whole.
- **Low maternal education.** The percentage of births to women with less than 12 years of education decreased notably, from 25 percent in 1990 to 21 percent in 1995, and then increased to 24 percent in 1998. Indianapolis was consistently below the average for the 50 largest cities throughout the 1990s for this measure.
- **Late or no prenatal care.** Over the 1990-1998 period, there was a sharp reduction in the proportion of births to women who received late or no prenatal care in Indianapolis. In 1998, the share of births to mothers who received late or no prenatal care was 4 percent in Indianapolis, compared with more than 5 percent in the 50 largest cities.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for Indiana births.
- **Low-birthweight births.** There was an increase in the proportion of low-birthweight births in Indianapolis during the 1990s, from 8 percent in the early 1990s to 10 percent in 1997 and 1998. In contrast, low-birthweight births accounted for a steady 9 percent of births in the 50 largest cities overall.
- **Preterm births.** The percentage of preterm births in Indianapolis increased from 12 percent in 1990 to 14 percent in 1998. This change contrasts with a stable pattern for the 50 largest cities overall at around 13 percent.

In summary, over the 1990-1998 period, Indianapolis saw a drop in the percentages of teen births that were repeat births and births to women receiving late or no prenatal care. There were smaller declines in the proportions of births to teenagers and births to mothers with less than 12 years of education. However, there was also a substantial increase in the share of births to unmarried women as well as rises in the percentages of preterm and low-birthweight births during this time.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Indianapolis, IN	16.6	16.5	16.6	15.8	15.0	15.2	15.4	15.7	15.5
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Indianapolis, IN	27.8	28.1	27.8	26.8	23.8	18.7	23.4	22.7	23.7
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Indianapolis, IN	36.5	39.3	40.0	41.2	40.6	40.5	41.2	42.6	43.4
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Indianapolis, IN	25.1	24.8	24.6	23.8	21.7	21.4	21.9	23.1	23.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Indianapolis, IN	10.5	9.9	7.1	6.6	3.7	3.7	3.5	3.5	4.0
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Indianapolis, IN**	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Indianapolis, IN	8.2	8.2	8.3	8.9	8.0	8.7	9.3	9.6	9.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Indianapolis, IN	12.0	12.1	12.2	12.8	11.6	11.7	12.3	12.7	13.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
White non-Hispanic	10,484	10,132	10,119	9,796	9,730	9,485	9,356	9,156	8,877
Black non-Hispanic	3,896	3,953	3,911	3,801	3,556	3,486	3,556	3,602	3,731
Hispanic	194	150	129	177	181	235	335	439	574
Other	202	177	139	172	176	240	208	242	282
Total	14,776	14,412	14,298	13,946	13,643	13,446	13,455	13,439	13,464

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.A. = Not Available. See Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Jacksonville, FL

The yearly number of births in Jacksonville decreased from 12,149 in 1990 to 11,396 in 1998. This decline was due to a reduction in births to whites, who accounted for 58 percent of Jacksonville births in 1998, compared with 65 percent in 1990.

During this same period, Jacksonville had notable decreases in the percentages of births to mothers with less than 12 years of education, births to mothers who smoked during pregnancy, and births to mothers who received late or no prenatal care (see figure). However, there was also a substantial increase in the proportion of births to unmarried women.

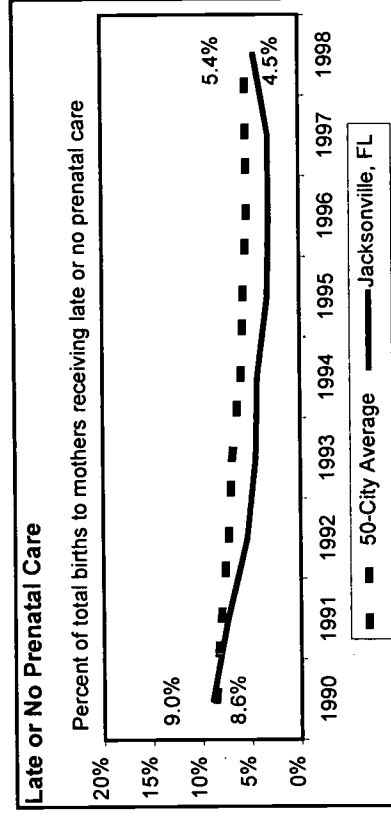
More specifically:

- **Teen births.** During the 1990s, between 15 percent and 16 percent of Jacksonville births were to teenagers. In 1998, Jacksonville was on par with the 50-city average for this measure.
- **Repeat teen births.** The percentage of Jacksonville teen births to young women who already had a child fluctuated during the 1990-1998 period, from a low of 22 percent in 1994 and 1996 to a high of 27 percent in 1991. In 1998, 24 percent of teen births were repeat births in both Jacksonville and the 50 largest cities as a group.
- **Births to unmarried women.** The share of births to unmarried women rose substantially during the 1990s, from 31 percent in 1990 to 39 percent in 1998. This increase outpaced a similar upward trend among the 50 largest cities as a whole during the 1990s. However, the percentage of Jacksonville births to unmarried women remained below the 50-city average in 1998.
- **Low maternal education.** The percentage of Jacksonville births to mothers with less than 12 years of education declined from 23 percent in 1990 through 1992 to 20 percent in 1998. Throughout this time, births to mothers with less than 12 years of education were substantially less common in Jacksonville than in the 50 largest cities as a group.
- **Late or no prenatal care.** Between 1990 and 1997, the percentage of births to mothers who received late or no prenatal care dropped dramatically, from 9 percent to 3 percent. However, this percentage then increased to 5 percent in 1998. Jacksonville was below the 50-city average in 1998.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** The share of Jacksonville births to mothers who smoked during pregnancy fell from 20 percent in 1990 to 12 percent in 1998. This change mirrored a similar decline in the 50 largest cities overall. However, Jacksonville was just above the 50-city average for this indicator throughout most of the 1990-1998 period.
- **Low-birthweight births.** The proportion of births in Jacksonville that were low-birthweight increased from 8 percent in the early 1990s to 10 percent in 1998. Over the same period, this proportion remained stable at 9 percent for the 50 largest cities as a whole.
- **Preterm births.** The share of preterm births in Jacksonville increased from 12 percent in 1990 to 14 percent in 1998. In 1998, Jacksonville's proportion of preterm births was slightly above the 50-city average.

In summary, over the 1990-1998 period, Jacksonville had reductions in the proportions of births to mothers with less than 12 years of education, births to mothers who received late or no prenatal care, and births to mothers who smoked during pregnancy. However, over this same period, there was a striking rise in the percentage of births to unmarried women, as well as an increase in the proportion of preterm births.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Jacksonville, FL	16.1	15.9	16.1	15.6	15.0	15.0	15.1	15.2	14.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Jacksonville, FL	25.3	26.5	24.4	24.5	21.6	23.0	21.7	23.7	23.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Jacksonville, FL	31.5	34.0	34.6	36.3	36.2	36.0	36.5	38.0	38.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Jacksonville, FL	22.6	23.1	22.6	21.3	21.1	20.1	19.1	19.3	19.6
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Jacksonville, FL	9.0	7.4	5.4	4.5	4.3	3.2	3.1	3.1	4.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Jacksonville, FL	20.0	19.2	16.7	15.6	14.9	12.0	11.0	11.9	11.9
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Jacksonville, FL	8.2	8.0	8.2	8.2	8.5	8.7	8.2	9.1	9.9
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Jacksonville, FL	12.3	12.2	11.9	12.9	13.2	12.1	12.2	13.3	14.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	7,892	7,510	7,356	6,967	6,748	6,752	6,601	6,593
	Black non-Hispanic	3,908	4,037	3,946	3,845	3,607	3,748	3,836	3,953
	Hispanic	232	263	266	270	309	326	395	427
	Other	117	178	196	227	277	345	423	423
	Total	12,149	11,988	11,764	11,309	10,941	11,171	11,255	11,396

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Kansas City, MO

The yearly number of births in Kansas City decreased from 7,979 in 1990 to 7,194 in 1998. Throughout this time, whites accounted for more than half of all births.* Births to Hispanics doubled from 4 percent to 8 percent of all births during the period.

Over the 1990-1998 period, Kansas City experienced a dramatic reduction in the percentage of births to women who smoked during pregnancy (see figure), as well as notable declines in the proportions of births to teens and births to mothers receiving late or no prenatal care.

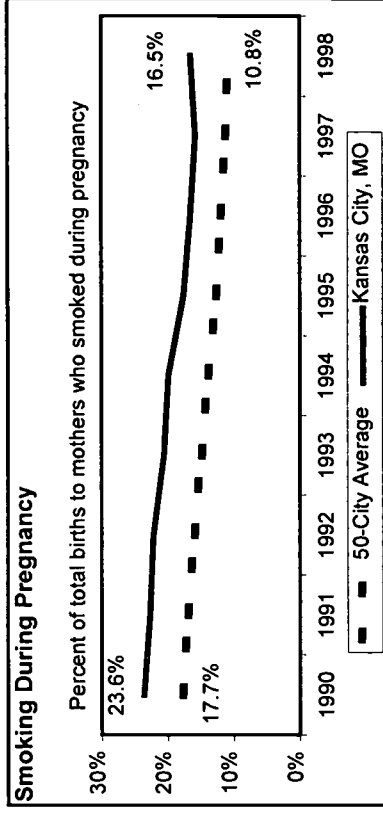
More specifically:

- **Teen births.** Teen births became a smaller share of Kansas City births over the 1990-1998 period. While teenagers accounted for 18 percent of births in 1990, they accounted for 16 percent in 1998. In 1998, Kansas City was just above the 50-city average of 15 percent.
- **Repeat teen births.** During the 1990s, the percentage of Kansas City teen births to young women who were already mothers fluctuated between 25 percent and 34 percent with no significant difference between the 1998 and 1990 figures. At 25 percent in 1998, Kansas City was on par with the 50 largest cities as a whole for this measure.
- **Births to unmarried women.** The share of births to unmarried women in Kansas City fluctuated somewhat during the 1990s, from a low of 45 percent in 1990 and 1997 to a high of 49 percent in 1994 and 1998. Throughout this time, Kansas City was above the 50-city average on this indicator.
- **Low maternal education.** Births in Kansas City to mothers with less than 12 years of education remained stable and consistently below the 50-city average throughout the 1990s. In 1998, 24 percent of Kansas City births were to women with less than 12 years of education, compared with 27 percent of births in the 50 largest cities as a whole.
- **Late or no prenatal care.** There was a sharp reduction in the proportion of Kansas City births to mothers receiving late or no prenatal care, from 7 percent in 1990 to 4 percent in 1998. This change mirrored a similar downward trend for the 50 largest cities as a group, with Kansas City below the 50-city average throughout the 1990s.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Kansas City experienced a dramatic decline in the share of births to mothers who smoked during pregnancy, from 24 percent in 1990 to 17 percent in 1998. Despite this progress, smoking during pregnancy remained more common in Kansas City than in the 50 largest cities overall throughout this period.
- **Low-birthweight births.** Low-birthweight births among Kansas City babies remained relatively stable over the 1990-1998 period. Low-birthweight babies accounted for 10 percent of Kansas City births, compared with 9 percent of births in the 50 largest cities overall.
- **Preterm births.** Over the 1990-1998 period, the percentage of preterm births in Kansas City remained stable and on par with the 50-city average. In 1990 and 1998, 13 percent of births were preterm in both Kansas City and the 50 largest cities as a whole.

In summary, Kansas City witnessed a striking drop in the percentage of births to mothers who smoked during pregnancy and sizable reductions in the proportions of births to teenagers and births to mothers receiving late or no prenatal care. Despite these improvements, the children of Kansas City got off to a less healthy start to life on four of the eight indicators, when compared with the 1998 50-city average.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens	18.1	17.3	17.4	15.9	17.2	16.6	16.2	15.5	15.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Kansas City, MO	28.6	34.1	31.5	28.4	25.6	25.4	26.3	26.2	25.2
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Kansas City, MO	44.6	46.2	46.9	47.7	49.3	45.9	45.7	44.8	48.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education	23.1	23.9	23.4	23.5	22.3	21.2	23.1	21.7	23.6
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Kansas City, MO	6.9	6.2	5.1	5.5	4.6	4.2	4.1	3.5	4.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy	23.6	22.7	22.2	20.6	19.9	17.6	16.6	15.8	16.5
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)	9.0	9.6	9.3	9.8	9.8	9.1	9.1	9.1	9.7
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Kansas City, MO	13.0	13.9	13.6	13.6	14.5	13.4	12.6	12.7	12.8
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Percent preterm births (less than 37 completed weeks of gestation)	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,288	4,146	4,051	3,882	3,435	3,752	4,048	3,747
	Black non-Hispanic	3,188	3,125	2,885	2,885	2,496	2,422	2,511	2,613
	Hispanic	337	381	334	377	411	439	510	578
	Other	166	165	168	200	179	216	217	229
	Total	7,979	7,817	7,438	7,344	6,521	6,829	7,326	7,194

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Las Vegas, NV

The yearly number of births in Las Vegas rose from 8,869 in 1990 to 12,191 in 1998. This increase was evident among all racial-ethnic groups, but was particularly pronounced among the Hispanic population. Moreover, the percentage of births to Hispanics nearly doubled during this period, from 17 percent in 1990 to 31 percent in 1998.

Las Vegas experienced a dramatic decrease in the proportions of births to mothers who smoked during pregnancy and births to mothers who received late or no prenatal care (see figure). However, during this time, the city also saw an overall increase in the proportion of births to unmarried women.

More specifically:

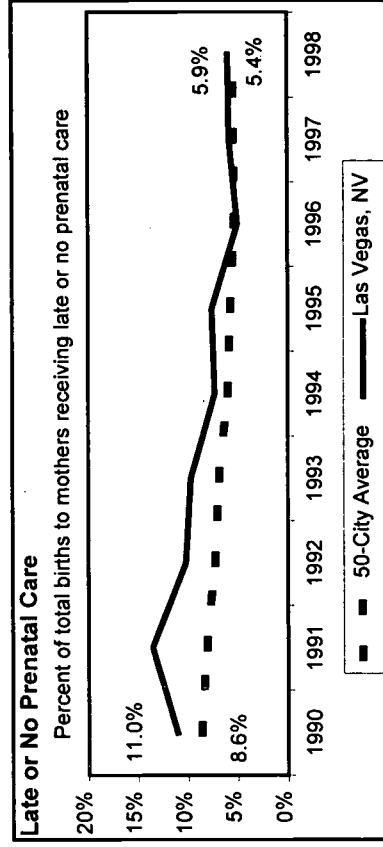
- **Teen births.** From 1990 to 1998, teen births in Las Vegas became a smaller share of total births. In 1998, the proportion of Las Vegas teen births was 12 percent, compared to the 50-city average of 15 percent.
- **Repeat teen births.** Despite minor fluctuations throughout the 1990-1998 period, the percentage of Las Vegas teen births to young women who already had a child was 24 percent in both 1990 and 1998. In contrast, this percentage decreased for the 50 largest cities as a whole during this same period. By 1998, Las Vegas and the 50 largest cities overall had the same proportion of teen births that were repeat births.
- **Births to unmarried women.** The percentage of Las Vegas births to unmarried women increased between 1990 and 1994. Data for 1995 and 1996 are unreliable due to a computer processing error. Data for 1997 and 1998 reflect improved coding practices in the state of Nevada and are not directly comparable with data for 1990-1994.** In 1998, the proportion of nonmarital births was 35 percent, compared with 43 percent for the 50 largest cities as a whole.
- **Low maternal education.** The percentage of births in Las Vegas to mothers with less than 12 years of education increased from 25 percent in 1990 to 29 percent by 1993. In 1998, the measure stood at 26 percent—just below the 50-city average.
- **Late or no prenatal care.** Although still slightly above the 50-city average in 1998, the percentage of births to mothers receiving late or no prenatal care in Las Vegas dropped from 11 percent in 1990 to 6 percent in 1998.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1997, Nevada began asking for mother's marital status directly. For more details, see Appendix 2.

- **Smoking during pregnancy.** The proportion of Las Vegas births to mothers who smoked during pregnancy fell from a high of 23 percent in 1991 to a low of 11 percent in 1998. This dramatic decrease in maternal smoking narrowed the gap between Las Vegas and the 50-city average during the 1990s.
- **Low-birthweight births.** The share of low-birthweight births fluctuated during the 1990s. There was an overall increase from 7 percent in 1990 to 8 percent in 1998. Las Vegas remained below the steady 50-city average of 9 percent on this indicator throughout the 1990-1998 period.
- **Preterm births.** A slight increase in the proportion of preterm births in Las Vegas brought the city from below the 50-city average in 1990 to equaling the 50-city average of 13 percent in 1998.

In summary, Las Vegas experienced important improvements during the 1990s, including substantial reductions in the proportion of births to women receiving late or no prenatal care and in the share of births to women who smoked during pregnancy.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Las Vegas, NV	13.7	13.9	12.9	13.8	13.0	12.7	13.0	12.8	12.3
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Las Vegas, NV	23.7	22.7	20.5	21.1	18.9	20.5	20.8	21.4	24.1
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Las Vegas, NV**	30.6	36.2	38.1	39.5	37.5	N.R.	N.R.	37.1	35.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Las Vegas, NV	24.9	26.2	26.9	29.1	25.8	24.7	23.3	26.3	26.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Las Vegas, NV	11.0	13.5	10.2	9.7	7.3	7.6	5.0	5.8	5.9
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Las Vegas, NV	21.5	22.7	21.8	19.8	16.8	15.8	11.6	12.3	11.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Las Vegas, NV	6.5	7.0	6.6	6.9	7.1	7.2	7.5	8.1	7.5
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Las Vegas, NV	11.1	11.9	11.5	12.5	12.4	12.0	11.8	13.1	12.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	5,892	6,214	5,759	5,459	5,292	6,088	6,337	5,894
	Black non-Hispanic	1,094	1,296	1,350	1,163	1,177	1,120	1,194	1,229
	Hispanic	1,474	1,640	1,886	1,936	2,052	2,567	3,108	3,347
	Other	409	464	521	518	566	723	954	1,010
	Total	8,869	9,614	9,516	9,076	9,087	10,498	11,593	12,191

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R.=Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in Long Beach fell from 10,990 in 1990 to 8,513 in 1998. The number of births to whites fell by almost half between 1990 and 1998. In contrast, births to Hispanics increased from 36 percent of Long Beach births in 1990 to 50 percent in 1998.*

Also during this time, Long Beach experienced a substantial reduction in the percentage of births to mothers receiving late or no prenatal care (see figure). Moreover, when compared with the 1998 50-city average, the children of Long Beach got off to a healthier start to life on four of seven available indicators.

More specifically:

- **Teen births.** Teen births consistently made up a smaller share of births in Long Beach than in the 50 largest cities as a whole during the 1990s. Throughout the nine-year period, births to teen mothers accounted for 13 percent of births in Long Beach, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** The proportion of teen births to young women who were already mothers fluctuated somewhat during the 1990s, but did not experience a statistically significant change from 1990 to 1998. Long Beach was above the 50-city average in 1998; repeat teen births accounted for 28 percent of teen births in Long Beach, compared with 24 percent in the 50 largest cities.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, the percentage of Long Beach births to unmarried women was 44 percent—essentially the same as for the 50 largest cities as a whole.
- **Low maternal education.** The proportion of Long Beach births to women with less than 12 years of education increased from 40 percent in 1990 to a high of 43 percent in 1995 and then decreased to 38 percent in 1998. These values remained considerably above the 50-city average throughout the nine-year period.
- **Late or no prenatal care.** During the 1990s, the share of Long Beach births to mothers receiving late or no prenatal care fell from 9 percent in

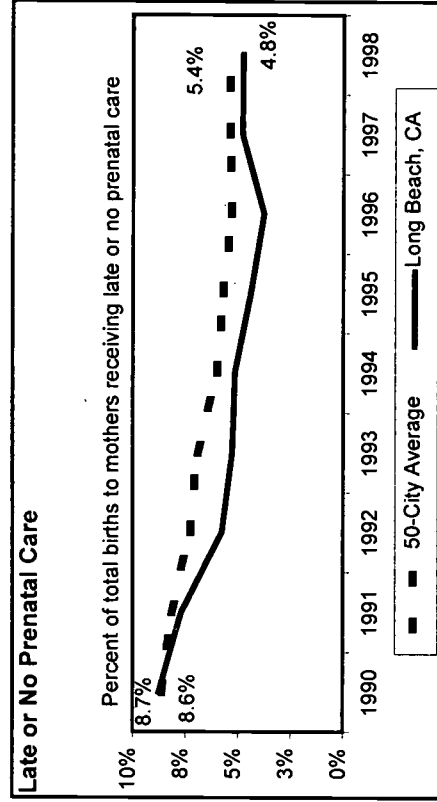
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

1990 to 4 percent in 1995 and 1996 and then increased slightly to 5 percent thereafter. This marked overall drop from 1990 to 1998 outpaced the downward trend in the 50 largest cities as a group, and Long Beach was below the 50-city average from 1991 onward.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** The percentage of Long Beach births that were low-birthweight remained steady at around 7 percent from 1990 to 1997, and then decreased slightly to 6 percent in 1998. Throughout this time, Long Beach was well below the 50-city average, which remained stable at 9 percent.
- **Preterm births.** Preterm births fluctuated between 10 percent and 13 percent of Long Beach births during the 1990s. At 12 percent in 1990 and 1998, Long Beach was just below the 50-city average on this measure.

In summary, Long Beach saw a remarkable decline in the proportion of births to mothers receiving late or no prenatal care during the 1990s. Other noteworthy changes include smaller declines in the share of births to women with less than 12 years of education and in the proportion of low-birthweight births.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Long Beach, CA	12.7	13.4	12.7	13.0	13.4	14.2	13.2	13.0	12.5
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Long Beach, CA	27.4	26.6	29.4	28.6	27.0	28.8	25.3	26.4	28.0
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Long Beach, CA**	37.8	38.9	40.7	41.4	43.6	34.0	33.6	40.4	43.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Long Beach, CA	39.8	42.2	41.8	40.8	40.9	43.3	41.6	39.8	38.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Long Beach, CA	8.7	7.7	5.8	5.3	5.1	4.4	3.8	4.8	4.8
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Long Beach, CA***	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Long Beach, CA	7.0	7.0	6.7	6.8	6.7	7.3	6.9	7.4	6.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Long Beach, CA	12.1	11.8	11.2	12.3	10.3	12.5	11.4	12.1	11.7
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,252	3,012	2,707	2,504	2,200	1,836	1,733	1,749
	Black non-Hispanic	1,858	1,856	1,772	1,799	1,762	1,622	1,500	1,388
	Hispanic	3,982	4,449	4,571	4,500	4,388	4,408	4,322	4,218
	Other	1,898	1,671	1,684	1,508	1,361	1,276	1,278	1,158
	Total	10,990	10,988	10,734	10,311	9,711	9,080	8,826	8,513

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Los Angeles, CA

The yearly number of births in the city of Los Angeles fell from 90,592 in 1990 to 65,846 in 1998. This decline was evident among all racial-ethnic groups. Births to Hispanics made up the majority of Los Angeles births throughout this period, accounting for 67 percent of births in 1998, compared with 62 percent in 1990.*

When compared with the 1998 50-city average, the children of Los Angeles got off to a healthier start to life on all but one available indicator. Although the proportion of Los Angeles births to mothers with less than 12 years of education remained well above the 50-city average, the city experienced a considerable reduction on this measure during the 1990s (see figure). Moreover, the proportion of births to mothers who received late or no prenatal care dropped dramatically.

More specifically:

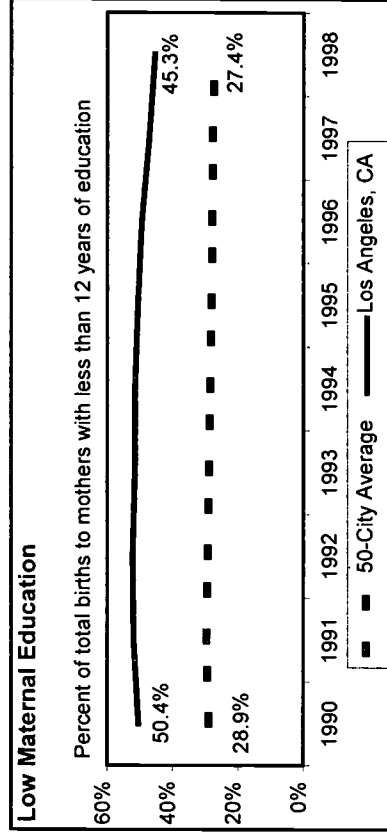
- **Teen births.** Teen births made up between 12 percent and 14 percent of Los Angeles births during the 1990-1998 period. Throughout this time, births to teenagers were less common in Los Angeles than in the 50 largest cities as a whole, where a steady 15 percent of births were to teens.
- **Repeat teen births.** Both Los Angeles and the 50 largest cities as a group experienced a reduction over the 1990-1998 period in the percentage of teen births to young women who were already mothers. In 1998, 22 percent of Los Angeles teen births were repeat births, compared with 24 percent of teen births in the 50 largest cities overall.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, births to unmarried women accounted for 40 percent of Los Angeles births, compared with 43 percent of births in the 50 largest cities overall.
- **Low maternal education.** Los Angeles had a considerable reduction in the share of births to women with less than 12 years of education, from 50 percent in 1990 to 45 percent in 1998. Despite this decline, Los Angeles remained substantially above the 50-city average throughout the nine-year period.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

- **Late or no prenatal care.** Already below the 50-city average in 1990, the percentage of Los Angeles births to mothers receiving late or no prenatal care fell by more than half over the 1990-1998 period. In 1998, 3 percent of Los Angeles births were to mothers who received late or no prenatal care, compared with 5 percent in the 50 largest cities overall.
- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** Babies born at a low birthweight made up a smaller share of births in Los Angeles than in the 50 largest cities overall throughout the 1990s. In 1998, 7 percent of Los Angeles births were low-birthweight, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** The percentage of preterm births in Los Angeles remained around 11 percent during the 1990s. Throughout this time, preterm births were less common in Los Angeles than in the 50 largest cities as a group.

In summary, Los Angeles had marked drops in the percentages of births to women who had less than 12 years of education and to women who received late or no prenatal care. When compared with the 1998 average for the 50 largest cities overall, Los Angeles' children got off to a healthier start to life on six of seven available indicators.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Los Angeles, CA	13.0	13.1	13.1	13.1	13.6	13.5	12.9	12.4	12.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Los Angeles, CA	23.5	23.8	24.6	23.8	23.0	22.5	23.3	22.6	21.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Los Angeles, CA**	45.3	47.9	49.1	50.1	50.1	44.5	42.1	39.0	40.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Los Angeles, CA	50.4	51.9	52.1	51.4	51.4	50.6	49.4	47.1	45.3
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Los Angeles, CA	7.4	6.4	5.6	5.3	4.5	4.0	3.3	3.1	3.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Los Angeles, CA***	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Los Angeles, CA	6.5	6.4	6.7	6.5	6.7	6.8	6.6	6.6	6.9
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Los Angeles, CA	11.0	11.1	10.9	11.2	11.0	11.1	11.1	10.7	11.5
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	16,207	15,071	14,132	13,093	11,082	10,964	10,712	10,581
	Black non-Hispanic	11,876	11,028	10,111	9,489	8,318	7,671	7,300	7,071
	Hispanic	56,572	57,997	57,024	54,527	49,333	47,958	45,500	43,843
	Other	5,937	5,607	5,541	5,278	4,775	4,623	4,658	4,631
	Total	90,592	89,703	86,808	82,387	73,508	71,216	67,919	65,846

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Louisville, KY*

The yearly number of births in Louisville remained relatively stable over the 1990-1998 period. There were 6,648 births in 1990 and 6,840 in 1998. In 1998, 66 percent of births were to whites and 30 percent were to blacks.**

When compared with the 1998 50-city average, the children of Louisville got off to a less healthy start to life on six out of eight indicators—including the percentage of births to teens (see figure). Still, Louisville saw four important improvements during the 1990s, including a striking drop in the share of births to women who smoked during pregnancy.

More specifically:

- **Teen births.** Teen births became a smaller share of Louisville births over the 1990-1998 period. While births to teenagers accounted for 21 percent of births in 1990, they accounted for 17 percent of births in 1998. Despite this decline, Louisville remained above the 50-city average throughout this time.
- **Repeat teen births.** There was no statistically significant change in the proportion of teen births to young mothers who were already mothers from 1990 to 1998, despite fluctuations throughout the period. In 1998, repeat teen births accounted for 26 percent of Louisville births—similar to the 50-city average.
- **Births to unmarried women.** The share of Louisville births to unmarried women rose from 43 percent in 1990 to a high of 49 percent in 1993, and then fell to 46 percent by 1998. The net 1990-1998 rise was similar to the increase for the 50 largest cities overall. However, births to unmarried women were more common overall in Louisville than in the 50 largest cities as a group throughout this time.
- **Low maternal education.** The percentage of births to women with less than 12 years of education declined in Louisville during the 1990s, from 28 percent in 1990 to 23 percent in 1998. Throughout this time, Louisville remained below the 50-city average on this indicator.

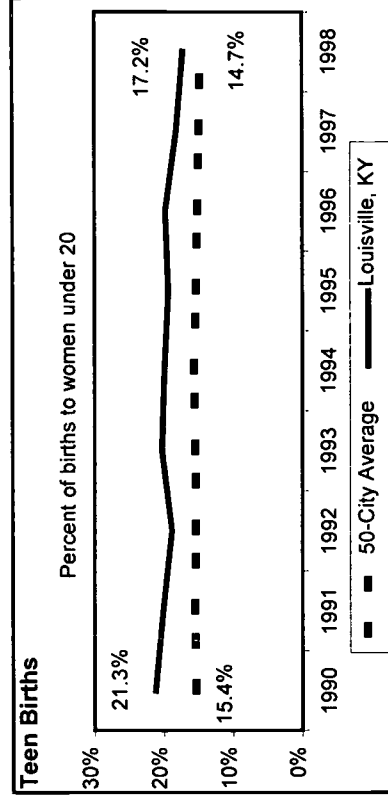
- **Late or no prenatal care.** Already much lower than the 50-city average in 1990, the percentage of Louisville births to mothers who received late or no prenatal care continued to decrease over the 1990-1998 period. In 1998, 2 percent of Louisville births were to women receiving late or no prenatal care, compared with 5 percent of births in the 50 largest cities overall.

* Louisville is not one of the 50 largest cities.

** Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** During the 1990s, Louisville experienced a sharp reduction in the proportion of births to mothers who smoked during pregnancy, from 29 percent in 1990 to 22 percent in 1998. Despite this drop, Louisville remained above the 50-city average throughout this time.
- **Low-birthweight births.** In both Louisville and the 50 largest cities as a whole, babies born at a low birthweight accounted for around 9 percent of births throughout the 1990-1998 period.
- **Preterm births.** Preterm births made up a slightly larger share of births in Louisville than in the 50 largest cities as a group during the 1990s. In 1990 and 1998, preterm births accounted for 14 percent of Louisville births, compared with 13 percent in the 50 largest cities overall.

In summary, Louisville saw sizable declines in the relatively small proportions of births to mothers receiving late or no prenatal care and births to mothers with less than 12 years of education over the 1990-1998 period. Although the percentages of births to mothers who smoked during pregnancy and births to teens dropped considerably during this time, these percentages remained well above the respective 50-city averages in 1998. During the same period, there was also an increase in the proportion of births to unmarried women.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Louisville, KY	21.3	20.1	18.8	20.3	19.9	19.4	19.7	18.2	17.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Louisville, KY	29.0	30.0	28.3	26.4	21.0	22.2	21.2	25.9	25.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Louisville, KY	43.2	45.6	46.6	48.7	47.4	47.7	48.0	46.9	46.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Louisville, KY	28.3	26.9	26.8	26.6	26.8	25.0	24.1	24.2	22.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Louisville, KY	3.8	4.0	3.6	3.5	3.6	3.1	2.6	2.6	2.2
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Louisville, KY	29.1	26.2	26.3	25.8	22.9	23.4	22.1	22.3	22.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Louisville, KY	9.4	9.6	8.6	9.4	8.9	8.8	9.1	9.4	9.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Louisville, KY	14.2	15.2	14.4	14.8	14.4	13.5	14.0	13.7	14.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	4,471	4,573	4,295	3,897	4,044	4,188	4,434	4,289	4,489
Black non-Hispanic	2,068	2,332	2,210	1,971	2,029	2,043	2,144	1,980	2,037
Hispanic	37	33	42	42	44	59	77	108	123
Other	72	97	85	120	112	138	135	147	191
Total	6,648	7,035	6,632	6,030	6,229	6,428	6,790	6,524	6,840

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Memphis, TN

The yearly number of births in Memphis declined from 12,604 in 1990 to 11,388 in 1998. This decrease was most evident in births to whites, who accounted for 24 percent of Memphis births in 1998, compared with 30 percent in 1990.*

Memphis saw a sharp reduction over the 1990-1998 period in the proportion of births to mothers who smoked during pregnancy. However, there was also a substantial increase in the percentage of births to unmarried women (see figure). Moreover, when compared with the 50-city average in 1998, the children of Memphis got off to a less healthy start to life on seven of eight measures.

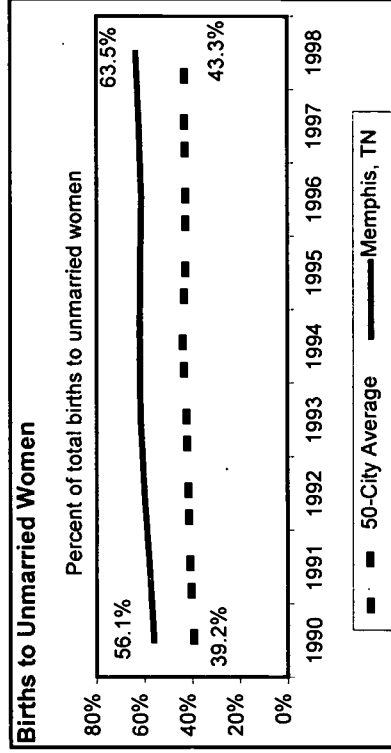
More specifically:

- **Teen births.** Throughout the 1990s, teen births were far more common in Memphis than in the 50 largest cities overall. While teenagers accounted for 21 percent of Memphis births in 1998, they accounted for 15 percent of births in the 50 largest cities overall in the same year.
- **Repeat teen births.** There was no clear trend during the 1990s in the proportion of Memphis teen births to young women who were already mothers. At 29 percent in 1998, Memphis was substantially higher than the 50-city average of 24 percent.
- **Births to unmarried women.** The already large gap between Memphis and the 50-city average widened during the 1990-1998 period for births to unmarried women. The share of Memphis births to unmarried women rose from 56 percent in 1990 to 64 percent in 1998.
- **Low maternal education.** Memphis experienced a slight rise in the proportion of births to women with less than 12 years of education that brought Memphis from below the 50-city average in 1990 to just above the 50-city average by 1998. In 1998, 28 percent of Memphis births were to women with less than 12 years of education, compared with 27 percent of births in the 50 largest cities overall.
- **Late or no prenatal care.** There was a slight increase in the percentage of Memphis births to women who received late or no prenatal care during the 1990s, from 7 percent in 1990 to 8 percent in 1998. This change contrasts with the downward trend of the 50 largest cities as a group. In 1998, 8 percent of Memphis births were to women

receiving late or no prenatal care, compared with 5 percent for the 50 largest cities overall.

- **Smoking during pregnancy.** Memphis experienced a remarkable drop in the percentage of births to women who smoked during pregnancy, from 16 percent in 1990 to 9 percent in 1998. Memphis was below the 50-city average on this indicator throughout the 1990s.
- **Low-birthweight births.** The proportion of Memphis births that were low-birthweight fluctuated between 12 percent and 14 percent over the 1990-1998 period. Throughout this time, low-birthweight births were more common in Memphis than in the 50 largest cities overall.
- **Preterm births.** Preterm births accounted for a relatively stable share of Memphis births from 1990 to 1998, despite a temporary increase in the mid-1990s. Memphis was well above the average for the 50 largest cities overall in 1998: preterm births accounted for 17 percent of Memphis births, compared with 13 percent of births in the 50 largest cities overall.

In summary, when compared with the 50-city average, Memphis' children got off to a less healthy start to life on all but one of the measures in 1998. The city also experienced a sizable increase in the proportion of births to unmarried women during the 1990s. However, there was a striking decrease in the percentage of births to women who smoked during pregnancy.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Memphis, TN	20.8	20.5	20.6	20.8	22.1	21.4	21.3	21.3	20.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Memphis, TN	31.4	33.3	32.7	34.2	29.7	28.5	30.0	28.7	28.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Memphis, TN	56.1	57.9	60.0	61.6	61.9	61.7	61.2	62.1	63.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Memphis, TN	27.1	27.5	27.6	26.9	27.1	26.5	27.1	28.1	28.3
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Memphis, TN	7.0	6.3	6.7	6.7	6.4	6.9	8.0	8.5	8.3
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Memphis, TN	15.7	13.0	15.8	14.3	13.0	13.2	11.6	10.6	9.5
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Memphis, TN	11.9	13.3	12.3	13.1	13.6	12.6	12.2	12.0	12.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Memphis, TN	17.8	18.8	18.3	19.5	19.6	18.8	17.0	16.8	17.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	3,806	3,748	3,454	3,149	3,132	2,943	2,831	2,790	2,709
Black non-Hispanic	8,642	8,615	8,748	8,712	8,167	7,798	7,828	8,007	8,192
Hispanic	36	66	69	101	117	169	213	273	301
Other	120	128	161	152	171	162	233	196	186
Total	12,604	12,557	12,432	12,114	11,587	11,072	11,105	11,266	11,388

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in Mesa increased from 5,814 in 1990 to 6,799 in 1998. The percentage of births to Hispanics nearly doubled during this period, rising from 15 percent in 1990 to 27 percent in 1998.* At the same time, the proportion of births to whites fell from 80 percent in 1990 to 65 percent in 1998.

During the 1990-1998 period, there was a dramatic reduction in the percentage of births to mothers in Mesa who smoked during pregnancy. At the same time, there were substantial increases in the proportions of births to unmarried women and to mothers with less than 12 years of education (see figure).

More specifically:

- **Teen births.** The proportion of Mesa births to teenage mothers increased from 10 percent in 1990 to 13 percent by 1994, and remained stable thereafter. Despite the overall increase from 1990 to 1998, the percentage of teen births in Mesa remained below the 50-city average of 15 percent in 1998.
- **Repeat teen births.** During the 1990s, the share of Mesa teen births to young women who were already mothers remained both relatively stable and below the average for the 50 largest cities overall. In 1998, the proportion of teen births that were repeat births was 21 percent in Mesa, compared with 24 percent in the 50 largest cities overall.
- **Births to unmarried women.** The percentage of Mesa births to unmarried women increased from 23 percent in 1990 to 32 percent in 1995, with the percentage remaining stable after that. The overall increase outpaced the upward trend of the 50-city average. However, births to unmarried women remained less common in Mesa than in the 50 largest cities as a whole throughout the 1990s.

- **Low maternal education.** While consistently lower than the average for the 50 largest cities overall, the percentage of Mesa births to mothers with less than 12 years of education increased from 18 percent in 1990 to 22 percent in 1997 and 1998.

- **Late or no prenatal care.** The share of Mesa births to mothers receiving late or no prenatal care remained relatively stable during the 1990-1998 period. In 1998, these births accounted for 4 percent of

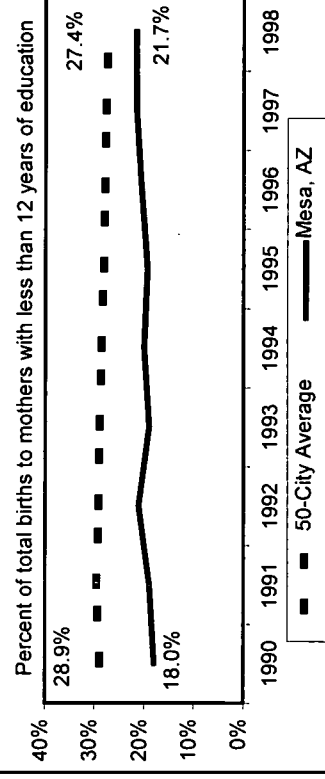
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

Mesa births, compared with 5 percent of births in the 50 largest cities overall.

- **Smoking during pregnancy.** During the 1990s, the proportion of Mesa births to mothers who smoked during pregnancy fell by half, from 16 percent in 1990 to 8 percent in 1998. This decrease paralleled the trend among the 50 largest cities as a group, and Mesa remained below the 50-city average for this indicator throughout the 1990-1998 period.
- **Low-birthweight births.** The proportion of births that were low-birthweight in Mesa remained stable at 6 percent during the 1990s. Throughout the 1990-1998 period, low-birthweight births were less prevalent in Mesa than in the 50 largest cities overall.
- **Preterm births.** Mesa had a lower proportion of preterm babies than the 50 largest cities overall throughout the 1990-1998 period. However, the percentage of preterm births in Mesa increased from 9 percent to 11 percent during this time.

In summary, when compared with the 50-city average, Mesa's children got off to a healthier start to life on all eight indicators. Moreover, the city experienced a striking reduction in the proportion of births to women who smoked during pregnancy over the 1990-1998 period. At the same time, however, Mesa saw increases in the percentages of births to unmarried women, births to mothers with less than 12 years of education, births to teens, and preterm births.

Low Maternal Education



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Mesa, AZ	10.5	12.4	12.1	12.4	13.2	13.1	12.3	13.3	12.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Mesa, AZ	20.5	18.4	21.8	20.7	21.7	18.0	19.8	20.6	21.4
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Mesa, AZ	22.8	25.8	27.3	29.8	31.2	31.8	32.0	32.4	31.4
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Mesa, AZ	18.0	18.9	21.1	19.0	20.0	19.4	20.5	21.6	21.7
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Mesa, AZ	4.7	3.8	3.7	4.7	4.7	4.6	4.3	4.3	4.4
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Mesa, AZ	15.6	15.9	14.1	14.6	13.5	11.7	10.7	9.5	8.1
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Mesa, AZ	5.5	5.7	5.6	6.2	6.1	5.3	6.3	6.2	5.9
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Mesa, AZ	8.8	8.9	9.8	10.5	10.0	9.9	9.3	10.3	10.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,653	4,377	4,360	4,211	4,270	4,493	4,227	4,426
	Black non-Hispanic	118	127	112	126	117	130	132	154
	Hispanic	878	979	1,074	1,093	1,223	1,478	1,634	1,857
	Other	165	172	171	317	339	280	280	362
	Total	5,814	5,655	5,717	5,747	5,949	6,355	6,402	6,799

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Miami, FL

The yearly number of births in Miami declined from 19,518 in 1990 to 13,277 in 1998. This decrease was evident across all racial-ethnic groups. In 1998, Hispanics and blacks accounted for more than 90 percent of all births in Miami.

Miami experienced significant improvements during the 1990s in five of the eight measures of a healthy start to life. The most dramatic improvement was a substantial drop in the percentage of births to mothers who smoked during pregnancy (see figure). However, the proportion of births to unmarried women increased somewhat during the 1990-1998 period.

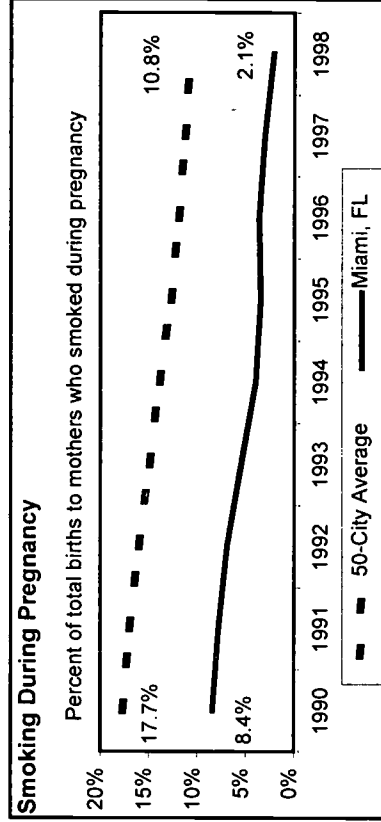
More specifically:

- **Teen births.** The proportion of Miami births to teen mothers remained relatively stable throughout the 1990s at 15 percent, on par with the 50-city average.
- **Repeat teen births.** The percentage of teen births to young women who already had a child dropped from between 28 and 29 percent in the early 1990s to 23 percent by 1998. This decline outpaced a similar downward trend among the 50 largest cities as a whole.
- **Births to unmarried women.** Births to unmarried women became a larger share of Miami births during the 1990-1998 period, increasing from 49 percent in 1990 to 52 percent in 1993 and then remaining relatively stable throughout the rest of the period. While the 50 largest cities as a group experienced a similar overall rise on this measure from 1990 to 1998, Miami remained above the 50-city average throughout this period.
- **Low maternal education.** During the 1990s, Miami saw a considerable decline in the proportion of births to mothers with less than 12 years of education. This drop, from 36 percent in 1990 to 26 percent in 1998, brought Miami slightly below the 50-city average in 1998.
- **Late or no prenatal care.** Already below the 50-city average in 1990, the proportion of Miami births to women receiving late or no prenatal care was cut in half during the 1990s. Births to women who received late or no prenatal care accounted for just 4 percent of Miami births in 1998, compared with 8 percent in 1990.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** The percentage of Miami births to mothers who smoked during pregnancy declined dramatically, from more than 8 percent in 1990 to just 2 percent in 1998. In contrast, births to mothers who smoked during pregnancy accounted for 11 percent of births in the 50 largest cities overall in 1998.
- **Low-birthweight births.** During the 1990s, the proportion of low-birthweight babies in Miami remained stable at 9 percent and close to the 1990-1998 average for the 50 largest cities overall.
- **Preterm births.** Miami had a slightly higher percentage of preterm births than the average for the 50 largest cities overall during the 1990s. In 1998, preterm births accounted for 14 percent of births in Miami, compared with 13 percent in the 50 largest cities overall.

In summary, Miami experienced significant improvements in five of the eight measures of a healthy start to life over the 1990-1998 period. Especially large improvements include drops in the percentages of births to mothers with less than 12 years of education, to mothers who received late or no prenatal care, and to mothers who smoked during pregnancy. However, there was also a small increase in the share of births to unmarried women during this time.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Miami, FL	14.8	15.0	14.3	14.0	14.6	14.1	14.9	14.3	14.7
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Miami, FL	28.0	28.5	29.3	26.2	22.5	25.0	24.2	22.6	23.1
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Miami, FL	49.3	51.2	50.7	51.6	52.1	52.5	51.6	51.9	52.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Miami, FL	35.9	33.0	31.5	30.0	30.5	30.4	29.0	28.7	26.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Miami, FL	7.6	6.2	5.5	4.5	4.0	3.9	4.5	4.1	3.8
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Miami, FL	8.4	7.8	6.9	5.4	3.9	3.4	3.6	3.0	2.1
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Miami, FL	9.4	9.3	9.1	9.4	9.1	9.4	9.5	9.0	9.5
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Miami, FL	15.6	15.4	14.4	14.6	14.6	14.0	14.3	14.2	14.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	2,325	1,977	1,828	1,839	1,658	1,429	1,311	1,128
	Black non-Hispanic	8,111	7,651	7,169	7,059	6,723	6,432	6,094	5,685
	Hispanic	8,915	7,952	7,701	8,091	7,654	7,562	7,310	6,847
	Other	167	137	175	156	171	146	178	138
	Total	19,518	17,717	16,873	17,145	16,206	15,528	14,196	13,277

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Milwaukee, WI

The yearly number of births in Milwaukee decreased from 12,818 in 1990 to 11,002 in 1998. While this decline was evident among both blacks and whites, the share of births to Hispanics doubled during this period, from 7 percent in 1990 to 15 percent in 1998.*

Milwaukee saw a number of improvements in measures of a healthy start to life during the 1990s, including a substantial reduction in the share of births to women who smoked during pregnancy. However, when compared with the 50-city average, Milwaukee's children got off to a significantly less healthy start to life on seven of eight indicators in 1998. There was also an increase during the nine-year period in the already large share of births to unmarried women (see figure).

More specifically:

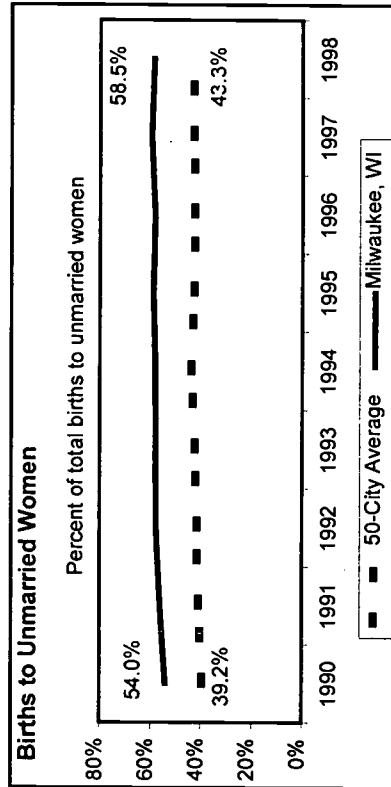
- **Teen births.** Teenagers accounted for a relatively high percentage of Milwaukee births during the 1990s. In 1998, 20 percent of births were to teen mothers, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** The proportion of Milwaukee teen births to young mothers who already had a child fluctuated during the 1990s, but underwent an overall decrease from 35 percent in 1990 to 31 percent in 1998. In spite of this change, repeat teen births made up a larger proportion of teen births in Milwaukee than in the 50 largest cities as a group throughout the nine-year period.
- **Births to unmarried women.** Already well above the 50-city average in 1990, the percentage of births to unmarried women continued to increase over the 1990-1998 period. Births to unmarried women accounted for 58 percent of Milwaukee births in 1998, compared with 43 percent in the 50 largest cities overall.
- **Low maternal education.** Births to women with less than 12 years of education made up a larger share of births in Milwaukee than in the 50 largest cities as a whole throughout the 1990s. In 1998, 35 percent of births in Milwaukee were to women with less than 12 years of education, compared with 27 percent in the 50 largest cities overall.
- **Late or no prenatal care.** The proportion of births to Milwaukee mothers who received late or no prenatal care decreased from 8 percent

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

in 1990 to 6 percent in 1997 and 1998. Milwaukee was close to the 50-city average throughout this period.

- **Smoking during pregnancy.** The percentage of Milwaukee births to women who smoked during pregnancy decreased from 28 percent in 1990 to 19 percent in 1998, yet Milwaukee remained well above the 50-city average throughout the nine-year period.
- **Low-birthweight births.** The proportion of Milwaukee babies born at a low birthweight remained relatively stable and just above the 50-city average throughout the 1990-1998 period. In 1998, low-birthweight births accounted for 10 percent of births in Milwaukee, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** Preterm births accounted for between 14 percent and 15 percent of Milwaukee births during the 1990s, compared with a steady 13 percent of births in the 50 largest cities overall.

In summary, when compared with the 50-city average, Milwaukee's children got off to a significantly less healthy start to life on all but one measure in 1998. Furthermore, there was an increase during the 1990s in the already large proportion of births to unmarried women. At the same time, however, the city saw sizable drops in the percentages of teen births that were repeat births, births to mothers receiving late or no prenatal care, and births to women who smoked during pregnancy.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Milwaukee, WI	20.7	20.8	21.0	20.5	20.5	21.4	21.1	20.8	20.1
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Milwaukee, WI	35.3	35.7	35.4	36.2	31.5	27.4	29.8	28.4	30.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Milwaukee, WI	54.0	56.1	57.7	57.9	58.0	58.8	58.1	59.5	58.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Milwaukee, WI	36.1	36.4	37.1	37.1	37.1	36.7	36.7	35.6	34.9
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Milwaukee, WI	8.0	7.9	7.3	7.6	7.5	6.4	6.3	5.7	5.7
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Milwaukee, WI	28.3	27.2	26.2	24.4	22.9	21.2	20.8	19.6	19.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Milwaukee, WI	9.9	9.8	9.9	10.3	10.4	9.8	9.8	10.1	9.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Milwaukee, WI	14.2	14.6	13.8	14.6	15.1	13.7	14.2	14.1	14.0
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	5,448	5,163	4,834	4,692	4,452	4,079	3,690	3,681
	Black non-Hispanic	5,980	5,938	6,009	5,870	5,599	5,178	5,095	5,170
	Hispanic	931	976	1,040	1,071	1,174	1,424	1,426	1,617
	Other	459	530	554	554	524	556	530	534
	Total	12,818	12,607	12,437	12,187	11,749	11,237	10,741	11,002

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Minneapolis, MN

The yearly number of births in Minneapolis decreased from 6,637 in 1990 to 6,336 in 1998. This slight decline was due to a reduction in births to whites, who accounted for 41 percent of Minneapolis births in 1998, compared with 57 percent in 1990.

Minneapolis remained relatively stable on six measures of a healthy start to life from 1990 to 1998. Two noteworthy improvements include marked reductions in the proportion of births to mothers who received late or no prenatal care and births to mothers who smoked during pregnancy (see figure).

More specifically:

- **Teen births.** The proportion of Minneapolis births to teenagers remained stable between 1990 and 1998 at around 14 percent. In 1998, Minneapolis was similar to the 50-city average of 15 percent.
- **Repeat teen births.** Over the 1990-1998 period, the percentage of teen births to young women who already had a child fluctuated somewhat, from a high of 34 percent in 1991 to a low of 26 percent in 1997. Repeat teen births accounted for a larger share of teen births in Minneapolis than in the 50 largest cities overall throughout this time.
- **Births to unmarried women.** The share of births to unmarried women increased during the early 1990s, from 43 percent in 1990 to 46 percent in 1994, and then returned to 43 percent in 1998. This contrasts with an upward trend among the 50 largest cities as a group during this period. In 1998, Minneapolis was on par with the 50-city average.
- **Low maternal education.** Births to mothers with less than 12 years of education ranged between 23 percent and 25 percent of Minneapolis births during the 1990s. At 25 percent in 1998, Minneapolis was just below the 50-city average of 27 percent.
- **Late or no prenatal care.** The percentage of births to mothers who received late or no prenatal care fell from 10 percent in 1990 to 7 percent in 1998. This change mirrored a similar downward trend among the 50 largest cities as a whole, with Minneapolis consistently above the 50-city average throughout the nine-year period.
- **Smoking during pregnancy.** Minneapolis experienced a dramatic reduction in maternal smoking during the 1990-1998 period. While

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

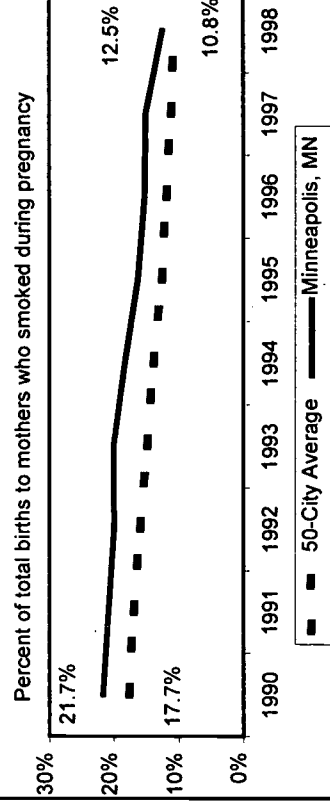
164

births to mothers who smoked during pregnancy accounted for 22 percent of Minneapolis births in 1990, they accounted for just 13 percent in 1998. Despite this change, smoking during pregnancy remained more common in Minneapolis than in the 50 largest cities overall in 1998.

- **Low-birthweight births.** The proportion of Minneapolis births that were low-birthweight remained relatively stable and just below the average for the 50 largest cities overall throughout the 1990s. In 1998, 8 percent of births in Minneapolis were low-birthweight, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** During the 1990s, preterm births were slightly less prevalent in Minneapolis than in the 50 largest cities as a group. While preterm births made up between 10 percent and 12 percent of Minneapolis births during the 1990-1998 period, they accounted for a steady 13 percent of births in the 50 largest cities overall.

In summary, Minneapolis saw a dramatic reduction in the percentage of births to women who smoked during pregnancy and a sizable decrease in the share of births to mothers who received late or no prenatal care over the 1990-1998 period. The city remained stable on most of the other indicators of a healthy start to life during the nine-year period.

Smoking During Pregnancy



165

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens	13.5	14.1	14.1	14.2	14.5	14.3	14.2	14.5	13.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers	32.0	34.4	31.7	32.1	29.7	27.8	29.9	25.6	28.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women	42.7	45.7	45.0	45.6	45.9	45.1	45.0	44.3	43.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education	24.7	24.1	22.6	23.1	23.1	24.1	23.0	24.2	25.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care	10.1	9.7	8.5	7.9	7.4	6.9	8.3	8.3	6.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy	21.7	20.9	20.0	20.1	18.3	16.3	15.3	15.1	12.5
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)	7.8	8.5	7.8	7.3	8.6	7.6	8.3	7.9	7.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)	11.1	12.4	11.5	11.3	12.1	10.8	11.3	10.3	10.7
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,798	3,715	2,730	2,147	2,474	2,578	2,686	2,582
	Black non-Hispanic	1,388	1,500	1,278	1,106	1,251	1,303	1,536	1,724
	Hispanic	139	183	179	229	226	400	531	714
	Other	1,312	1,217	2,096	2,555	1,978	1,290	1,210	1,316
	Total	6,637	6,615	6,283	6,037	5,929	5,804	6,061	6,336

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Nashville-Davidson, TN

The yearly number of births in Nashville-Davidson remained relatively stable during the 1990-1998 period. There were 8,519 births in 1990 and 8,318 in 1998. While the yearly number of births decreased for both whites and blacks, they increased for Hispanics. Hispanics' share of total Nashville births rose from 1 percent in 1990 to 6 percent in 1998.*

During the 1990s, Nashville remained relatively stable on most measures of a healthy start to life with two exceptions. Nashville experienced a dramatic reduction in the proportion of births to mothers who smoked during pregnancy (see figure). However, there was also a sizable increase in the percentage of births to unmarried women.

More specifically:

- **Teen births.** The share of births to teenagers was both stable and on par with the average for the 50 largest cities during the 1990s. In 1990 and 1998, 15 percent of births were to teens in both Nashville and the 50 largest cities overall.
- **Repeat teen births.** The percentage of teen births to young women who were already mothers fluctuated somewhat during the 1990s, from as high as 29 percent in 1992 to as low as 22 percent in 1996. The apparent decrease on this measure from 1990 to 1998, however, was not statistically significant. In 1998, 24 percent of teen births were repeat births in both Nashville and the 50 largest cities overall.
- **Births to unmarried women.** There was an increase in the share of Nashville births to unmarried women, from 36 percent in 1990 to 41 percent in 1998. This rise paralleled the upward trend in the 50 largest cities as a group. However, Nashville was consistently below the 50-city average throughout the 1990s.
- **Low maternal education.** There were no major changes in the percentage of Nashville births to women with less than 12 years of education during the 1990s. In 1998, 25 percent of Nashville births were to women with less than 12 years of education, compared with 27 percent of births in the 50 largest cities overall.
- **Late or no prenatal care.** The proportion of Nashville births to women receiving late or no prenatal care remained relatively stable

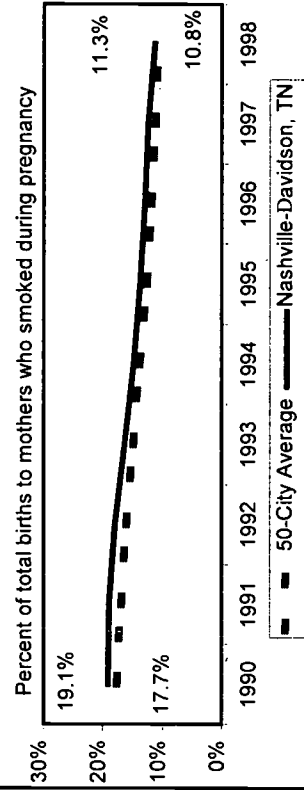
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

during the 1990s at around 3 percent. Throughout this period, Nashville remained below the 50-city average.

- **Smoking during pregnancy.** Nashville experienced a dramatic reduction in maternal smoking during the 1990s from 19 percent of births in 1990 to 11 percent in 1998. The 50 largest cities as a whole also experienced a decrease in maternal smoking during this time period.
- **Low-birthweight births.** During the 1990s, the share of low-birthweight births in Nashville remained relatively stable and close to the average for the 50 largest cities overall. In 1998, 10 percent of Nashville births were low-birthweight, compared with 9 percent of births in the 50 largest cities overall.
- **Preterm births.** The percentage of Nashville births that were preterm remained steady from 1990 to 1998. In 1998, 14 percent of Nashville births were preterm, just above the 50-city average of 13 percent.

In summary, Nashville experienced a dramatic reduction in the percentage of births to women who smoked during pregnancy over the 1990-1998 period. However, there was also a notable rise in the proportion of Nashville births to unmarried women during this time. Nashville remained relatively stable and close to the 50-city average on most other measures of a healthy start to life from 1990 to 1998.

Smoking During Pregnancy



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Nashville-Davidson, TN	15.1	15.6	14.9	15.5	15.7	14.7	15.6	14.2	14.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Nashville-Davidson, TN	27.5	27.0	29.1	26.5	25.7	23.9	22.3	23.9	24.4
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Nashville-Davidson, TN	35.9	38.2	37.9	41.1	39.8	38.8	39.3	39.1	40.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Nashville-Davidson, TN	24.4	24.6	24.5	24.0	23.5	22.8	23.4	22.4	24.9
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Nashville-Davidson, TN	3.5	3.6	3.2	2.4	3.1	2.9	3.0	3.0	3.2
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Nashville-Davidson, TN	19.1	18.9	18.0	16.3	14.8	13.7	12.9	12.4	11.3
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Nashville-Davidson, TN	9.0	8.9	9.0	9.5	9.8	9.3	9.2	9.5	9.7
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Nashville-Davidson, TN	13.4	12.6	12.9	14.7	13.5	12.8	12.2	13.9	13.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	5,715	5,568	5,475	5,217	5,242	5,098	5,011	4,945
	Black non-Hispanic	2,584	2,673	2,550	2,636	2,420	2,497	2,385	2,533
	Hispanic	72	74	80	109	136	196	340	405
	Other	148	135	162	181	213	248	242	301
	Total	8,519	8,450	8,267	8,143	8,011	8,061	8,168	8,318

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

New Orleans, LA

New Orleans experienced a nearly 20 percent decline in the yearly number of births, from 9,292 in 1990 to 7,581 in 1998. During the 1990s, blacks accounted for about 4 of every 5 births in New Orleans.*

Over the 1990-1998 period, New Orleans experienced dramatic declines in the percentage of births to women who smoked during pregnancy and in the share of teen births to young women who were already mothers (see figure). However, the percentages of low-birthweight and preterm births—and of births to unmarried women and to teens—remained high throughout the 1990s.

More specifically:

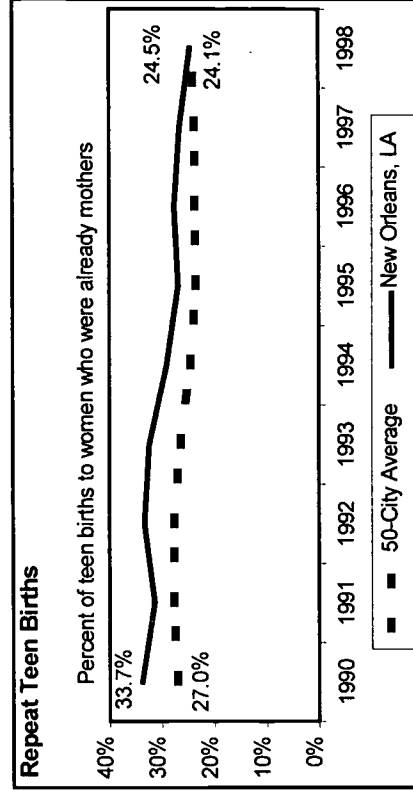
- **Teen births.** Teenagers accounted for a relatively high proportion of New Orleans births during the 1990s. In 1998, 21 percent of births in New Orleans were to teenagers, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** New Orleans experienced a substantial decline in births to teens who were already mothers as a share of all teen births. The proportion of teen births that were repeat births dropped from 34 percent in 1990 to 25 percent in 1998, essentially closing the gap with the 50-city average.
- **Births to unmarried women.** Births to unmarried women became a larger share of New Orleans births during the 1990s. While unmarried women accounted for 60 percent of New Orleans births in 1990, they accounted for 65 percent in 1998. Births to unmarried women remained considerably more common in New Orleans than in the 50 largest cities as a whole throughout the nine-year period.
- **Low maternal education.** There was a decrease in the percentage of births to mothers with less than 12 years of education, from a high of 33 percent in 1992 to 27 percent in 1997 and 1998. New Orleans was very close to the 50-city average for this indicator in both 1990 and 1998.
- **Late or no prenatal care.** There was a dramatic improvement in prenatal care during the 1990s that outpaced a similar trend in the 50 largest cities overall. The percentage of New Orleans births that were to women who received late or no prenatal care fell from 12 percent in 1990 to 6 percent in 1994, and remained at 6 percent through

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

1998. This change closed the gap between New Orleans and the 50-city average for the measure of prenatal care.

- **Smoking during pregnancy.** The proportion of women who smoked during pregnancy fell from 13 percent in 1990 to 2 percent in 1998. New Orleans was consistently lower than the 50-city average on this indicator throughout the 1990-1998 period.
- **Low-birthweight births.** Low-birthweight births were more common in New Orleans than in the 50 largest cities as a group during the 1990s. In both 1990 and 1998, 13 percent of births were low-birthweight in New Orleans, compared with 9 percent in the 50 largest cities.
- **Preterm births.** The percentage of preterm births in New Orleans decreased from 19 percent in 1990 to 17 percent in 1998. Despite this improvement, New Orleans remained well above the 50-city average on this measure throughout the 1990s.

In summary, New Orleans experienced remarkable declines in the percentages of teen births that were repeat births, births to women who received late or no prenatal care, and births to women who smoked during pregnancy. Low-birthweight babies, preterm births, and births to teens and to unmarried women continued to account for relatively large shares of total births.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
New Orleans, LA	21.7	22.5	23.6	23.3	23.7	22.3	21.0	20.4	21.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
New Orleans, LA	33.7	31.3	33.3	32.4	29.0	26.8	27.6	26.5	24.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
New Orleans, LA	59.9	61.4	64.0	64.7	64.3	63.6	64.0	63.5	65.1
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
New Orleans, LA	30.4	32.1	32.5	31.8	30.6	29.2	29.3	27.3	27.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
New Orleans, LA	12.0	12.4	11.9	7.6	5.8	5.8	6.1	5.8	5.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
New Orleans, LA	13.4	11.0	7.2	5.3	5.9	4.2	3.6	2.6	2.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
New Orleans, LA	12.8	12.8	12.2	11.6	12.2	12.1	12.4	13.0	12.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
New Orleans, LA	18.8	19.3	18.3	19.2	17.7	17.1	17.6	17.4	17.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	1,726	1,580	1,443	1,451	1,330	1,319	1,223	1,284	1,172
Black non-Hispanic	7,144	7,229	7,193	7,266	6,895	6,380	5,980	6,091	6,056
Hispanic	203	182	181	162	221	176	170	180	165
Other	219	260	207	237	246	208	216	183	188
Total	9,292	9,251	9,024	9,116	8,692	8,083	7,589	7,738	7,581

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

New York City, NY

The yearly number of births in New York City declined from 135,198 births in 1990 to 119,911 in 1998. This overall drop in total births was evident for all racial-ethnic groups examined here.*

During the 1990s, New York City experienced improvements in all but one measure of a healthy start to life. In addition, teen births were consistently much less prevalent in New York City than in the 50 largest cities overall (see figure).

More specifically:

- **Teen births.** Throughout the 1990s, teen births were markedly less common in New York City than in the 50 largest cities as a group. In both 1990 and 1998, teenagers accounted for 10 percent of births in New York City, compared with roughly 15 percent in the 50 largest cities.
- **Repeat teen births.** Births to teens who were already mothers became a smaller share of teen births in New York City, falling from 22 percent in 1990 to 18 percent in 1998. This improvement paralleled the downward trend among the 50 largest cities as a whole, and New York City remained below the 50-city average for this indicator throughout the 1990s.
- **Births to unmarried women.** Births to unmarried women were overstated in New York City from 1990 through 1996. When reporting procedures were corrected in 1997, 45 percent of births were to unmarried women.** New York City was above the 50-city average on this indicator in both 1997 and 1998.

- **Low maternal education.** There was a slight overall decrease in the percentage of New York City births to women with less than 12 years of education, from 27 percent in 1990 through 1994 to 25 percent in 1998. This change mirrored the small downward trend among the 50 largest cities as a whole.

- **Late or no prenatal care.** There was a striking improvement in prenatal care in New York City during the 1990s that outpaced a similar trend in the 50 largest cities overall. The percentage of New York City births to women who received late or no prenatal care fell by more than half – from 15 percent in 1990 to 7 percent in 1998. This positive

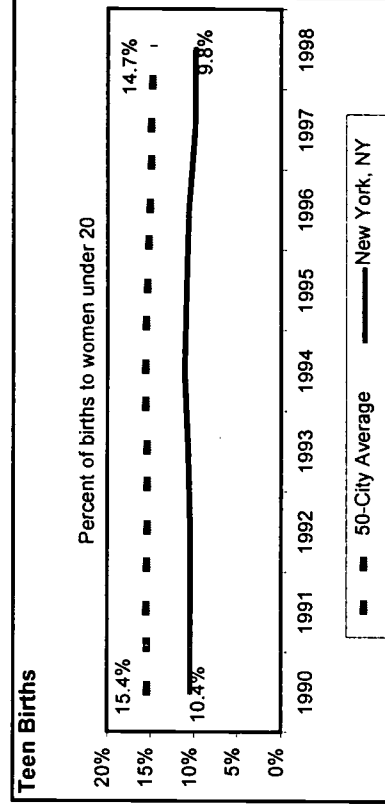
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Beginning in 1997, New York City stopped using the surnames of the parents as one of the criteria for inferring the mother's marital status. For more details, see Appendix 2.

change nearly closed the gap between New York City and the 50-city average for this indicator.

- **Smoking during pregnancy.** The proportion of births to mothers who smoked during pregnancy declined between 1994, when data first became available, and 1998. Births to mothers who smoked during pregnancy accounted for only 4 percent of New York City births in 1998, compared with 7 percent in 1994. New York City was well below the 50-city average for this indicator throughout this period.
- **Low-birthweight births.** Low-birthweight babies made up a relatively stable share of total births during the 1990–1998 period. Throughout this time, 9 percent of births were low-birthweight in both New York City and the 50 largest cities as a group.
- **Preterm births.** The proportion of New York City births that were preterm remained similar to the 50-city average throughout the 1990s. In 1998, preterm births accounted for 12 percent of births in New York City, compared with 13 percent in the 50 largest cities.

In summary, New York City experienced a marked drop in the percentage of births to mothers who received late or no prenatal care. Moreover, the city saw reductions in the share of teen births that were repeat births and in the proportion of all births to women who smoked during pregnancy—and remained below the 50-city average for these two indicators throughout the 1990–1998 period. Teen births were markedly less common in New York City than in the 50 largest cities overall during this time.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
New York, NY	10.4	10.4	10.4	10.7	11.1	10.9	10.6	9.9	9.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
New York, NY	21.8	22.7	21.8	22.1	22.5	21.8	19.9	18.6	18.2
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
New York, NY**	44.5	45.2	46.1	50.2	52.3	52.0	53.9	45.0	45.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
New York, NY	26.9	27.3	26.9	26.7	26.9	26.2	25.8	25.3	25.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
New York, NY	14.6	12.7	11.4	10.4	9.4	8.1	7.5	7.0	6.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
New York, NY***	N.A.	N.A.	N.A.	N.A.	6.5	5.6	4.9	4.8	4.3
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
New York City, NY	9.3	9.6	9.1	9.2	9.0	8.9	8.7	8.8	8.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
New York City, NY	12.7	13.0	12.4	12.1	12.2	12.0	11.9	12.2	12.0
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	34,122	32,363	31,418	29,750	31,863	31,928	31,257	31,994
	Black non-Hispanic	41,234	40,858	39,795	38,440	38,980	37,462	35,074	33,686
	Hispanic	43,909	44,103	43,131	42,801	42,953	43,225	40,910	38,856
	Other	15,933	16,465	17,398	18,579	13,888	14,116	15,044	14,295
	Total	135,198	133,789	131,742	129,570	127,684	122,956	118,903	119,911

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

** See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

BEST COPY AVAILABLE

179

Oakland, CA

The yearly number of births in Oakland decreased from 7,910 in 1990 to 6,377 in 1998. While births to whites and blacks declined, births to Hispanics rose by 25 percent.*

When compared with the 50-city average in 1998, Oakland's children got off to a significantly healthier start to life on four of the seven available measures. In addition, the city experienced a dramatic drop in the percentage of births to mothers who received late or no prenatal care (see figure). Declines in the proportions of births to teens and to women with less than 12 years of education were also noteworthy.

More specifically:

- **Teen births.** A reduction in the proportion of Oakland births to teens brought the city from simply matching the 50-city average in 1990 to consistently below that average from 1996 to 1998. In 1998, 13 percent of Oakland births were to teens, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** The share of teen births to young women who already had a child fluctuated somewhat during the 1990s, but experienced no statistically significant change from 1990 to 1998. In 1998, repeat teen births accounted for 22 percent of Oakland teen births, similar to the 50-city average.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, 39 percent of Oakland births were to unmarried women, compared with 43 percent of births in the 50 largest cities overall.
- **Low maternal education.** The proportion of Oakland births to mothers with less than 12 years of education remained relatively stable at 35 percent from 1990 through 1996, and then decreased to 33 percent in 1998. Despite this overall decrease from 1990 to 1998, Oakland remained well above the 50-city average on this measure throughout this period.
- **Late or no prenatal care.** The percentage of Oakland births to mothers receiving late or no prenatal care fell by more than half over the

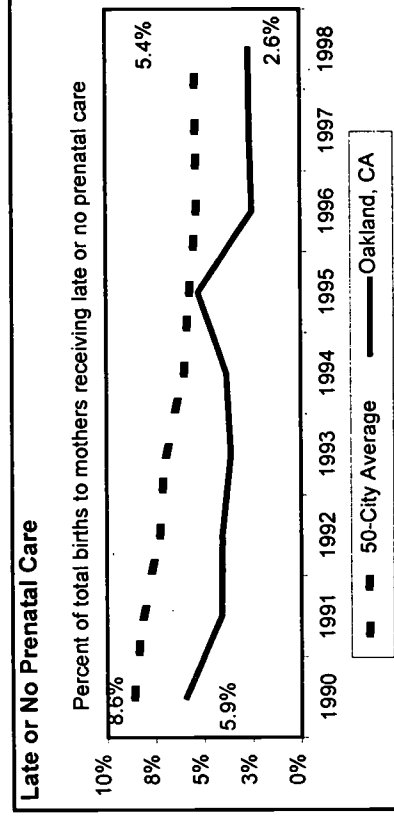
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

1990s, from 6 percent in 1990 to less than 3 percent in 1996 through 1998, despite a temporary increase in 1995.** Throughout this time, births to mothers who received late or no prenatal care made up a smaller share of births in Oakland than in the 50 largest cities as a group.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** Low-birthweight babies accounted for between 9 percent and 10 percent of Oakland births during the 1990s. At 9 percent in 1990 and 1998, Oakland was on par with the 50-city averages for these years.
- **Preterm births.** The share of Oakland births that were preterm fluctuated somewhat over the 1990s, but was the same in 1990 and 1998. In both 1990 and 1998, preterm births accounted for 12 percent of births in Oakland, compared with 13 percent in the 50 largest cities overall.

In summary, when compared with the 50-city average, the children of Oakland got off to a significantly healthier start to life on four of the seven available indicators in 1998. The city also witnessed a number of improvements over the 1990-1998 period, including drops in the percentages of births to teenagers, to mothers who had less than 12 years of education, and to mothers who received late or no prenatal care.



** The reason for the temporary increase in 1995 in the percentage of births with late or no prenatal care is not known.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Oakland, CA	15.0	14.8	15.7	15.0	14.4	14.8	13.8	13.7	13.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Oakland, CA	23.4	28.0	25.4	25.6	25.4	23.2	21.9	19.2	21.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Oakland, CA**	47.7	49.6	48.9	49.2	49.3	41.6	39.4	38.5	39.2
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Oakland, CA	34.8	35.5	35.3	35.2	35.1	34.6	35.3	33.9	33.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Oakland, CA***	5.9	4.1	4.0	3.6	3.8	5.3	2.5	2.6	2.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Oakland, CA****	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Oakland, CA	8.8	9.8	9.9	9.4	9.9	8.9	8.7	8.9	9.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Oakland, CA	11.9	12.4	12.8	11.8	11.7	11.3	10.8	11.7	11.5
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	1,336	1,602	1,111	1,064	997	993	951	910
	Black non-Hispanic	3,733	3,480	3,497	3,139	2,866	2,432	2,451	2,270
	Hispanic	1,556	1,656	1,799	1,799	1,719	1,729	1,852	1,945
	Other	1,285	1,199	1,240	1,233	1,158	1,107	1,154	1,252
	Total	7,910	7,937	7,647	7,235	6,740	6,439	6,408	6,377

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***See footnote *** in text.

****N.A. = Not Available. See Appendix 2 for more details.

*****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Oklahoma City, OK

The yearly number of births in Oklahoma City increased from 7,204 births in 1990 to 7,702 births in 1998. Births to Hispanics became a larger share of total births during the 1990s, accounting for 15 percent of births in 1998, compared with 8 percent in 1991, when data for Hispanic births first became available.*

During 1990-1998 period, Oklahoma City experienced a drop in the percentage of births to women who received late or no prenatal care (see figure) and an increase in the proportion of births to unmarried women.

More specifically:

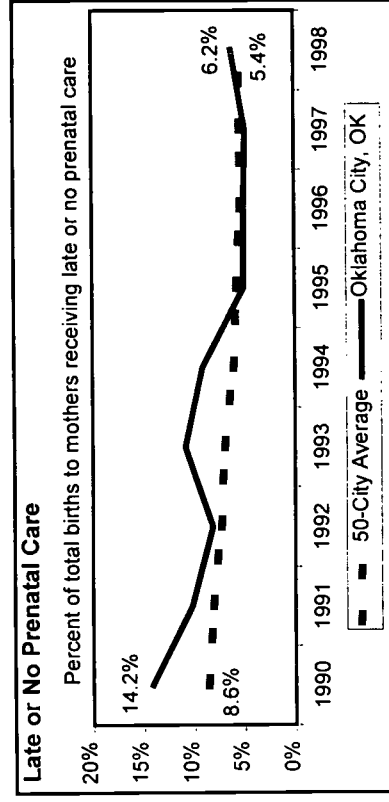
- **Teen births.** The proportion of Oklahoma City births to teenagers remained somewhat higher than the 50-city average during the 1990s. In 1998, this gap was quite small, with teen births accounting for 16 percent of births in Oklahoma City, compared with 15 percent in the 50 largest cities.
- **Repeat teen births.** Between 1990 and 1996 the percentage of teen births to young women who already had a child fluctuated but dropped overall from 26 percent in 1990 to 22 percent in 1996. Data on repeat teen births in 1997 and 1998 are not shown due to considerable underreporting of birth order.**
- **Births to unmarried women.** The percentage of births to unmarried women underwent a sizable increase between 1990 and 1998. Unmarried women accounted for 42 percent of Oklahoma City births in 1998, compared with 34 percent in 1990. The 50 largest cities as a group experienced a smaller upward trend during this period.
- **Low maternal education.** The proportion of Oklahoma City births to mothers with less than 12 years of education (29 percent in 1998) remained relatively stable and close to the 50-city average during the 1990s.
- **Late or no prenatal care.** The percentage of Oklahoma City births to women who received late or no prenatal care fluctuated somewhat but dropped overall, from 14 percent in 1990 to 5 percent to 6 percent in 1995-1998. This change outpaced the downward trend in the 50 largest cities as a group and nearly closed the gap with the 50-city average.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** If it is assumed that most of the births with birth order unknown are actually first-order births, the resulting percentage of repeat teen births for Oklahoma City in 1997 and 1998 is comparable to that in most other cities. See Appendix 2 for more details.

- **Smoking during pregnancy.** There was no clear trend from 1991-1998 in smoking during pregnancy in Oklahoma City despite a sizable improvement in the 50 largest cities overall. The percentage of Oklahoma City mothers who smoked during pregnancy was 19 percent in 1998, compared with a 50-city average of 11 percent.
- **Low-birthweight births.** Low-birthweight babies accounted for a constant share of total births in Oklahoma City during the 1990-1998 period. Similar to the 50-city average, 8 percent of babies were low-birthweight in Oklahoma City in both 1990 and 1998.
- **Preterm births.** The percentage of births that were preterm remained relatively constant and close to the average for the 50 largest cities. Preterm births accounted for 12 percent of Oklahoma City births in 1990 and 13 percent in 1998.

In summary, Oklahoma City experienced a striking improvement during the 1990s in one important measure of a healthy start to life. The proportion of births to women who received late or no prenatal care dropped substantially, essentially closing the gap with the 50-city average on this indicator. During the same time, the city experienced a large increase in the percentage of births to unmarried women. The share of births to women who smoked during pregnancy remained relatively high.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens	Oklahoma City, OK 16.9	18.7	17.3	18.0	17.4	17.1	17.1	16.2	16.4
	50-City Average 15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers	Oklahoma City, OK** 26.3	31.2	29.2	26.2	25.0	23.4	21.7	N.R.	N.R.
	50-City Average 27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women	Oklahoma City, OK 33.7	36.9	37.4	38.8	38.4	39.5	39.2	40.6	42.0
	50-City Average 40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education	Oklahoma City, OK 27.8	27.4	28.2	29.5	30.0	29.5	28.6	28.3	28.6
	50-City Average 28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care	Oklahoma City, OK 14.2	10.2	8.1	10.8	9.1	5.0	5.0	4.8	6.2
	50-City Average 8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy	Oklahoma City, OK*** N.A.	19.9	17.7	18.9	19.5	18.6	17.5	17.2	19.2
	50-City Average 17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)	Oklahoma City, OK 7.6	7.3	8.0	8.3	8.5	7.8	8.5	9.0	8.4
	50-City Average 8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)	Oklahoma City, OK 11.9	11.4	10.8	12.0	11.6	11.3	12.6	12.5	12.7
	50-City Average 12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	N.A.	4,662	4,635	4,513	4,360	4,263	4,442	4,350
	Black non-Hispanic	N.A.	1,609	1,549	1,514	1,499	1,430	1,443	1,537
	Hispanic	N.A.	608	625	671	732	817	1,002	1,154
	Other	N.A.	485	487	487	557	585	618	661
	Total	7,204	7,364	7,296	7,185	7,148	7,095	7,322	7,702

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Omaha, NE

During the 1990s, the yearly number of births in Omaha remained relatively stable. There were 5,884 births in 1990 and 5,735 in 1998. Despite this stability, the racial-ethnic composition of new births changed considerably, with the percentage of Omaha births to Hispanics increasing from 3 percent in 1990 to 12 percent in 1998.*

Omaha experienced sharp declines over the 1990-1998 period in the proportion of teen births to young women who were already mothers (see figure) and in the share of births to women who smoked during pregnancy. When compared with the 50-city average, Omaha's children got off to a healthier start to life on all but one of the eight indicators in 1998.

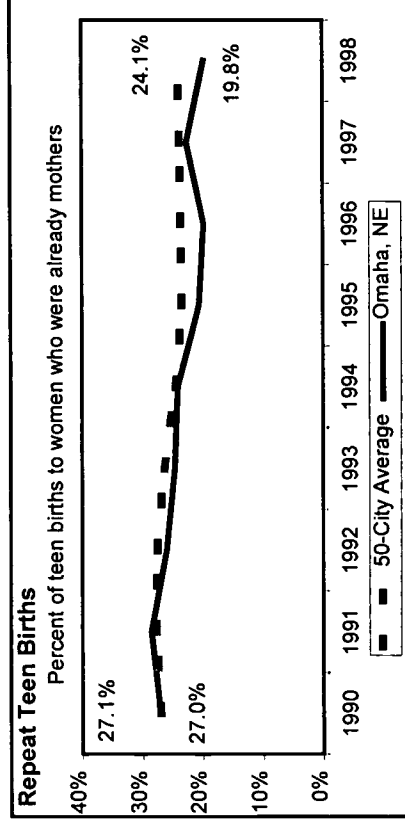
More specifically:

- **Teen births.** There was no clear trend in the share of births to teenagers during the 1990s. In 1998, Omaha was below the 50-city average on this measure, with teen births accounting for 12 percent of births in Omaha, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** The percentage of Omaha teen births to young women who already had a child fell from 27 percent in 1990 to 20 percent in 1998. This change, sharper than the decline in the 50-city average for this measure, brought Omaha even with the 50-city average in 1990 to below the 50-city average from 1992 through 1998.
- **Births to unmarried women.** The proportion of Omaha births to unmarried women increased from 35 percent in 1990 to 39 percent in 1994 and then returned to 35 percent in 1998. Throughout this time, Omaha remained below the 50-city average.
- **Low maternal education.** Births to women with less than 12 years of education became a larger share of Omaha births during the 1990s, rising from 16 percent in 1990 to 19 percent in 1998. Despite this increase, Omaha was well below the 50-city average of 27 percent in 1998.
- **Late or no prenatal care.** Throughout the 1990s, between 3 percent and 4 percent of births in Omaha were to women who received late or no prenatal care. This was well below the average for the 50 largest

cities, which experienced a substantial decline during the 1990s, but was never below 5 percent.

- **Smoking during pregnancy.** Omaha saw a striking reduction in the percentage of births to women who smoked during pregnancy, from 25 percent in 1990 to 18 percent in 1998. This change paralleled a similar downward trend among the 50 largest cities as a group. However, smoking during pregnancy remained more common in Omaha than in the 50 largest cities overall throughout the 1990s.
- **Low-birthweight births.** Between 1990 and 1998, between 7 percent and 8 percent of Omaha births were low-birthweight. Throughout the 1990s, Omaha was slightly below the 50-city average on this measure.
- **Preterm births.** During the 1990s, the share of births that were preterm remained stable and somewhat lower than the average for the 50 largest cities overall. In 1998, preterm births accounted for 12 percent of births in Omaha, compared with 13 percent in the 50 largest cities overall.

In summary, when compared with the 50-city average in 1998, the children of Omaha got off to a healthier start to life on all but one indicator: maternal smoking. Moreover, Omaha experienced a substantial drop from 1990 to 1998 in the proportion of births to mothers who smoked during pregnancy. There was also a striking decrease in the percentage of teen births that were repeat births. However, the share of births to mothers with less than 12 years of education rose during this time.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Omaha, NE	12.8	12.6	12.4	12.6	14.4	12.5	12.7	13.1	11.9
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Omaha, NE	27.1	28.6	26.0	24.7	24.1	20.6	19.8	22.6	19.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Omaha, NE	34.9	34.6	35.6	36.8	38.7	37.1	35.6	36.7	34.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Omaha, NE	16.2	17.0	16.6	16.5	17.6	16.9	17.6	18.8	19.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Omaha, NE	4.1	3.8	3.7	3.4	3.5	3.1	3.2	3.3	4.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Omaha, NE	25.3	23.9	23.3	23.0	22.1	20.6	17.7	18.6	18.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Omaha, NE	7.0	6.6	7.0	7.1	7.5	7.5	6.9	8.0	7.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Omaha, NE	10.7	10.8	11.4	11.4	11.2	11.5	10.5	11.9	11.6
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,431	4,245	4,055	3,859	3,643	3,838	3,890	3,838
	Black non-Hispanic	1,118	1,095	1,062	1,008	1,029	941	952	961
	Hispanic	185	235	272	297	369	549	604	696
	Other	150	152	155	177	161	233	225	240
	Total	5,884	5,727	5,544	5,341	5,202	5,561	5,671	5,735

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Philadelphia, PA

The yearly number of births in Philadelphia declined from 29,762 in 1990 to 22,104 in 1998. The number of births fell among both whites and blacks, who together accounted for the vast majority of Philadelphia births during the 1990s.

During the 1990-1998 period, there was a striking reduction in the percentage of births to mothers who received late or no prenatal care (see figure), as well as notable drops in the percentages of births to mothers who smoked during pregnancy and teen births to young women who were already mothers. However, there was also a substantial rise in the share of births to unmarried women.

More specifically:

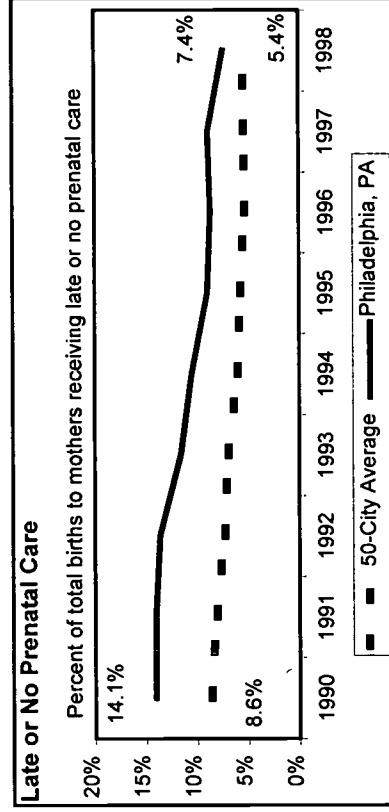
- **Teen births.** Throughout the 1990s, teen births remained more common in Philadelphia than in the 50 largest cities overall. In 1998, 18 percent of Philadelphia births were to teens, compared with 15 percent of births in the 50 largest cities overall.
- **Repeat teen births.** There was a substantial drop in the proportion of teen births to young women who were already mothers, from a high of 31 percent in 1991 and 1992 to 25 percent in 1997 and 1998. This change outpaced the drop in the 50-city average, essentially closing the gap between Philadelphia and the 50-city average by 1998.
- **Births to unmarried women.** Philadelphia saw a sizable increase in the share of births to unmarried women, from 57 percent in 1990 to 62 percent in 1996 through 1998. Although the 50 largest cities as a whole experienced a similar rise, Philadelphia was substantially above the 50-city average on this measure throughout the nine-year period.
- **Low maternal education.** The proportion of Philadelphia births to women with less than 12 years of education remained close to the 50-city average during the 1990s. In 1998, births to women with less than 12 years of education made up 26 percent of Philadelphia births, compared with 27 percent of births in the 50 largest cities overall.
- **Late or no prenatal care.** The percentage of Philadelphia births to women who received late or no prenatal care fell from 14 percent in 1990 to just above 7 percent in 1998. This drop outpaced the

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

downward trend of the 50 largest cities overall. However, Philadelphia remained above the 50-city average in 1998.

- **Smoking during pregnancy.** During the 1990-1998 period, there was a dramatic reduction in the share of births to women who smoked during pregnancy in both Philadelphia and the 50 largest cities as a group. However, in 1998, 16 percent of births in Philadelphia were to mothers who smoked during pregnancy, compared with 11 percent in the 50 largest cities overall.
- **Low-birthweight births.** The proportion of Philadelphia births that were low-birthweight remained stable and above the 50-city average throughout the 1990s. In 1998, low-birthweight births accounted for 11 percent of Philadelphia births, compared with 9 percent of births in the 50 largest cities overall.
- **Preterm births.** Preterm births were more prevalent in Philadelphia than in the 50 largest cities overall throughout the 1990-1998 period. In 1998, 15 percent of Philadelphia births were preterm, compared with 13 percent of births in the 50 largest cities overall.

In summary, when compared with the 50-city average, the children of Philadelphia got off to a less healthy start to life on seven of eight measures in 1998. However, Philadelphia saw important improvements during the 1990s, including sharp reductions in the shares of teen births that were repeat births, births to women who received late or no prenatal care, and births to women who smoked during pregnancy. At the same time, there was a notable increase in the proportion of births to unmarried women.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Philadelphia, PA	17.2	17.6	17.4	17.6	18.2	18.4	18.2	18.4	18.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Philadelphia, PA	30.2	30.8	30.6	29.8	28.7	25.9	26.4	24.8	24.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Philadelphia, PA	57.3	59.4	60.9	61.5	61.8	60.7	61.7	62.4	62.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Philadelphia, PA	28.0	29.1	29.7	28.9	29.1	28.1	27.8	27.5	26.5
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Philadelphia, PA	14.1	14.1	13.6	11.6	10.5	9.0	8.7	8.9	7.4
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Philadelphia, PA	23.5	22.9	22.3	22.1	20.4	19.5	18.4	17.5	16.4
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Philadelphia, PA	11.5	11.8	11.6	11.3	11.4	11.2	11.6	11.1	11.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Philadelphia, PA	16.5	16.3	15.9	15.9	15.7	15.4	15.5	15.0	14.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	10,515	9,918	9,407	8,864	8,646	8,230	7,491	6,929
	Black non-Hispanic	15,522	15,182	14,840	14,229	13,568	12,146	11,505	11,403
	Hispanic	2,561	2,635	2,517	2,646	2,593	2,576	2,595	2,395
	Other	1,164	1,370	1,315	1,222	1,247	1,250	1,204	1,331
	Total	29,762	29,105	28,079	26,961	26,054	24,202	22,795	22,104

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Phoenix, AZ

The yearly number of births in Phoenix increased from 20,586 in 1990 to 23,168 in 1998. This change was due primarily to a dramatic increase in Hispanic births, which accounted for 50 percent of Phoenix births in 1998, compared with 32 percent in 1990.* In contrast, the number and proportion of births to both whites and blacks decreased.

Phoenix saw a considerable drop during the 1990-1998 period in the percentage of births to mothers who smoked during pregnancy. However, there were also substantial increases in the shares of births both to mothers with less than 12 years of education (see figure) and to unmarried women.

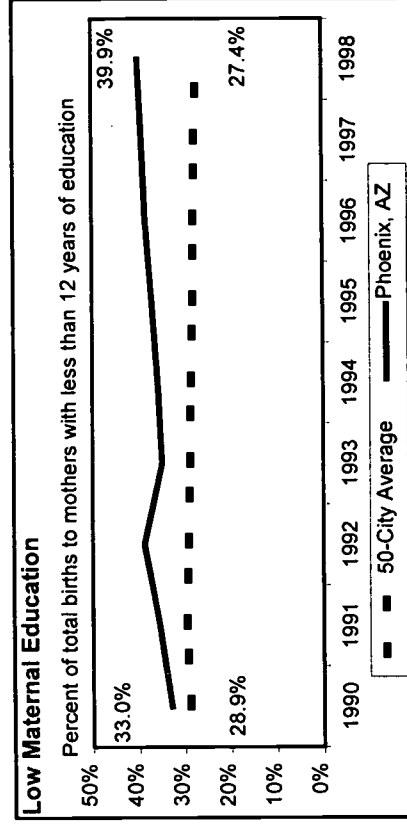
More specifically:

- **Teen births.** A slight increase in the share of births to teens brought Phoenix from matching the 50-city average in 1990 to above it in 1998. Teen births accounted for 17 percent of Phoenix births in 1998, compared with 15 percent of births in the 50 largest cities overall.
- **Repeat teen births.** The percentage of teen births to young mothers who already had a child fluctuated between 22 percent and 27 percent during the 1990s, but did not exhibit a significant change from 1990 to 1998. In 1998, the proportion of teen births that were repeat births in Phoenix was 25 percent, similar to the 50-city average.
- **Births to unmarried women.** There was a substantial increase in the proportion of births to unmarried women in Phoenix during the 1990s, from 37 percent in 1990 to 46 percent in 1998. This trend outpaced the rise among the 50 largest cities as a whole and brought Phoenix from below the 50-city average in 1990 to above it in 1998.
- **Low maternal education.** The percentage of Phoenix births to women with less than 12 years of education increased from 33 percent in 1990 to 39 percent in 1992, fell to 35 percent in 1993, and then steadily increased to 40 percent in 1998. This overall increase widened the gap between Phoenix and the 50-city average.
- **Late or no prenatal care.** The proportion of Phoenix births to women who received late or no prenatal care decreased from 10 percent in 1990 to 8 percent in 1998. However, in 1998, Phoenix was substantially above the 50-city average of 5 percent.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** The percentage of Phoenix births to mothers who smoked during pregnancy fell from 17 percent in 1990 to 8 percent in 1998. This drop placed Phoenix below the 50-city average in 1998.
- **Low-birthweight births.** The proportion of Phoenix births that were low-birthweight remained steady during the 1990s at 7 percent. Throughout the 1990-1998 period, this percentage was consistently lower than the stable 50-city average of 9 percent.
- **Preterm births.** Throughout the 1990s, preterm births were somewhat less prevalent in Phoenix than in the 50 largest cities as a group. In 1998, preterm births accounted for 12 percent of births in Phoenix, compared with 13 percent in the 50 largest cities overall.

In summary, Phoenix experienced a dramatic reduction in the percentage of births to mothers who smoked during pregnancy. However, the city also experienced marked increases in the proportions of births to unmarried women and births to women with less than 12 years of education. In addition, the percentage of births to women receiving late or no prenatal care was substantially higher than the 50-city average in 1998.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Phoenix, AZ	15.5	16.1	16.6	16.3	16.7	16.5	16.5	16.6	17.0
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Phoenix, AZ	26.4	26.8	27.1	26.6	25.2	22.0	24.6	24.8	24.8
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Phoenix, AZ	37.1	39.4	41.5	43.3	44.2	44.8	45.3	44.7	45.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Phoenix, AZ	33.0	35.5	38.8	35.0	35.8	37.0	38.4	39.1	39.9
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Phoenix, AZ	9.8	8.8	7.1	8.0	7.2	9.6	8.9	8.1	8.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Phoenix, AZ	17.2	16.0	13.6	13.7	13.6	12.9	11.0	9.5	8.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Phoenix, AZ	7.0	7.2	7.2	6.9	7.2	6.9	7.0	7.0	7.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Phoenix, AZ	11.0	10.6	11.5	11.3	11.8	11.2	10.4	11.4	11.8
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	11,676	11,359	10,974	10,420	10,259	10,667	10,318	9,051
	Black non-Hispanic	1,418	1,379	1,304	1,196	1,243	1,125	1,154	1,195
	Hispanic	6,620	6,942	7,326	7,641	8,527	9,393	10,818	11,674
	Other	872	888	895	1,274	1,352	998	1,125	1,205
	Total	20,586	20,568	20,499	20,531	21,381	22,183	23,415	23,168

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Pittsburgh, PA

The yearly number of births in Pittsburgh dropped from 5,511 in 1990 to 4,735 in 1998. This decline was greatest for blacks, who accounted for 41 percent of Pittsburgh births in 1990, but only 35 percent in 1998.*

During the 1990s, Pittsburgh experienced positive changes in all eight measures of a healthy start to life. These changes include drops in the percentage of births to mothers with less than 12 years of education (see figure) and in the percentage of births to mothers who received late or no prenatal care.

More specifically:

- **Teen births.** Teen births became a smaller share of total Pittsburgh births over the 1990-1998 period. While teenagers accounted for 16 percent of births in 1990 through 1994, they accounted for 13 percent in 1998. In 1998, the percentage of births to teens in Pittsburgh was below the 50-city average.
- **Repeat teen births.** The percentage of teen births to young women who already had a child fluctuated somewhat but dropped overall, from 28 percent in 1990 to 23 percent in 1998, with a particularly large drop from 1995 to 1996. This change during the 1990s paralleled a similar downward trend in the 50 largest cities as a whole.
- **Births to unmarried women.** Births to unmarried women remained more common in Pittsburgh than in the 50 largest cities as a group throughout the 1990-1998 period. However, this gap narrowed over the nine-year period, as the percentage of births to unmarried women underwent a slight overall decline in Pittsburgh and rose in the 50 largest cities as a group.

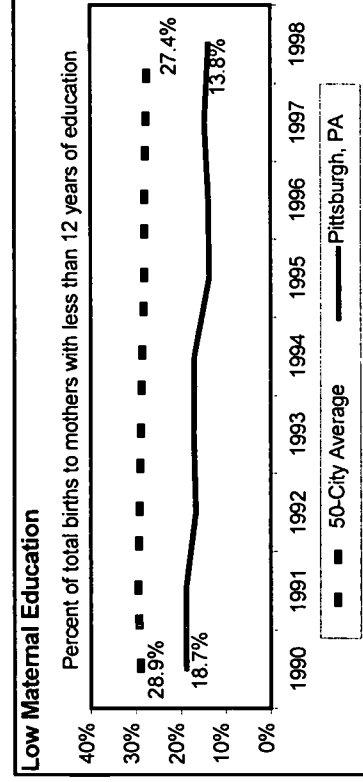
- **Low maternal education.** The percentage of births to women with less than 12 years of education dropped from 19 percent in 1990 to 14 percent in 1998. Throughout the 1990-1998 period, births to women with less than 12 years of education were much less common in Pittsburgh than in the 50 largest cities overall.

- **Late or no prenatal care.** Between 1990 and 1998, the percentage of Pittsburgh births to women who received late or no prenatal care fell by more than half, from 7 percent in 1990 to 3 percent in 1998. This sizable drop outpaced a similar trend in the 50 largest cities as a whole.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** Pittsburgh experienced a decline in smoking during pregnancy, mirroring the trend in the 50-city average. Births to mothers who smoked during pregnancy accounted for 32 percent of Pittsburgh births in 1990, compared with 24 percent in 1998. However, throughout the 1990s, smoking during pregnancy was notably more common in Pittsburgh than in the 50 largest cities as a group.
- **Low-birthweight births.** The percentage of Pittsburgh births that were low-birthweight underwent an overall decline, from 11 percent in 1990 to 9 percent in 1998. This positive change closed the gap between Pittsburgh and the 50-city average.
- **Preterm births.** A slight reduction over the 1990-1998 period in the proportion of births that were preterm closed the small gap between Pittsburgh and the 50-city average. In 1998, preterm births accounted for 13 percent of births in both Pittsburgh and the 50 largest cities as a whole.

In summary, Pittsburgh experienced improvements in all eight measures of a healthy start to life during the 1990-1998 period. Particularly striking were declines in the percentages of births to mothers with less than 12 years of education and to women who received late or no prenatal care. Moreover, the percentage of Pittsburgh births to women who received late or no prenatal care was consistently below the average for the 50 largest cities. However, when compared with the 50-city average, the proportion of births to mothers who smoked during pregnancy remained high throughout the nine-year period.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Pittsburgh, PA	15.6	15.6	15.7	15.9	15.6	13.9	13.9	13.9	13.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Pittsburgh, PA	27.5	29.6	29.9	27.9	28.7	27.6	22.8	24.5	22.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Pittsburgh, PA	49.9	51.9	53.0	53.8	53.9	50.7	48.5	48.0	47.6
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Pittsburgh, PA	18.7	18.9	16.7	17.1	17.0	13.7	13.8	14.7	13.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Pittsburgh, PA	7.1	7.0	6.4	6.1	5.2	4.9	4.5	4.2	3.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Pittsburgh, PA	31.9	32.3	31.5	29.9	29.1	26.2	24.5	23.6	24.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Pittsburgh, PA	11.2	10.9	10.3	11.6	10.8	11.1	9.1	9.7	9.3
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Pittsburgh, PA	14.3	14.5	14.7	14.7	14.8	13.6	11.9	12.6	12.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	3,100	2,766	2,802	2,628	2,527	2,683	2,722	2,807
	Black non-Hispanic	2,233	2,325	2,334	2,178	1,975	1,745	1,649	1,656
	Hispanic	34	37	50	45	41	53	52	59
	Other	144	149	190	203	203	206	204	213
	Total	5,511	5,277	5,376	5,054	4,746	4,681	4,627	4,735

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Portland, OR

The yearly number of births in Portland was 7,256 in 1990 and 7,373 in 1998. The proportion of Portland births to Hispanics rose during this period from 4 percent in 1990 to 11 percent in 1998.

When compared with the 50-city average, the children of Portland got off to a healthier start to life on seven of eight indicators in 1998. In addition, the city experienced a notable reduction over the 1990-1998 period in the percentage of births to mothers who smoked during pregnancy (see figure).

More specifically:

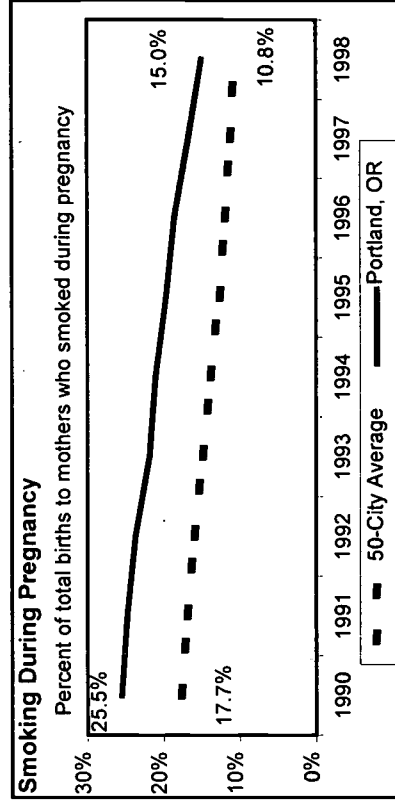
- **Teen births.** Births to teenagers accounted for between 11 percent and 13 percent of Portland births during the 1990-1998 period. Throughout the 1990s, Portland was below the stable 50-city average of 15 percent on this indicator.
- **Repeat teen births.** During the 1990s, the proportion of teen births to young women who were already mothers made up a generally smaller share of teen births in Portland than in the 50 largest cities as a whole. In 1998, 20 percent of Portland teen births were repeat births, compared with 24 percent of teen births in the 50 largest cities overall.
- **Births to unmarried women.** Births to unmarried women were less common in Portland than in the 50 largest cities overall throughout the 1990-1998 period. In 1998, 35 percent of births in Portland were to unmarried women, compared with 43 percent in the 50 largest cities overall.
- **Low maternal education.** The share of Portland births to women with less than 12 years of education remained relatively stable and below the average for the 50 largest cities overall throughout the 1990s. In 1998, 20 percent of Portland births were to women with less than 12 years of education, compared with 27 percent of births in the 50 largest cities overall.
- **Late or no prenatal care.** Births to Portland women who received late or no prenatal care fell from 6 percent in 1990 to 4 percent in 1998. The 50 largest cities as a whole also experienced a decline on this measure, but Portland was below the 50-city average throughout the nine-year period.
- **Smoking during pregnancy.** Portland saw a dramatic decrease in the percentage of births to women who smoked during pregnancy, from 25

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

percent in 1990 to 15 percent in 1998. This drop outpaced the downward trend of the 50 largest cities as a group. However, Portland remained above the 50-city average on this indicator during the 1990s.

- **Low-birthweight births.** The proportion of births that were low-birthweight remained stable in both Portland and the 50 largest cities overall during the 1990s. Throughout the nine-year period, 6 percent of births in Portland were low-birthweight, compared with 9 percent of births in the 50 largest cities overall.
- **Preterm births.** Preterm births made up a smaller percentage of births in Portland than in the 50 largest cities as a group over the 1990-1998 period. In 1998, 10 percent of births in Portland were preterm, compared with 13 percent in the 50 largest cities overall.

In summary, when compared with the 50-city average in 1998, Portland's children got off to a healthier start to life on all but one indicator: maternal smoking. Yet, Portland experienced a striking reduction in the percentage of births to women who smoked during pregnancy over the 1990-1998 period and the gap between Portland and the 50-city average narrowed. During the same time, the city also saw a decrease in the share of births to mothers receiving late or no prenatal care and an increase in the proportion of births to unmarried women.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Portland, OR	11.8	12.2	12.1	13.4	13.3	12.5	12.3	10.7	11.3
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Portland, OR	22.4	23.5	23.8	22.1	21.7	23.1	23.7	19.1	19.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Portland, OR	32.6	34.9	34.7	36.4	35.1	35.0	35.3	33.3	34.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Portland, OR	21.0	21.9	21.1	22.3	22.1	21.1	21.8	19.9	19.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Portland, OR	5.9	5.7	4.5	4.5	4.2	4.5	4.0	3.4	3.9
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Portland, OR	25.5	24.8	23.7	21.8	21.0	19.6	18.5	16.7	15.0
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Portland, OR	6.1	6.3	6.1	6.1	6.2	6.1	6.2	6.0	6.3
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Portland, OR	9.8	9.9	9.2	9.5	9.6	10.1	9.3	9.5	10.0
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	5,634	5,481	5,175	4,815	5,130	5,219	5,176	4,936	5,106
Black non-Hispanic	737	809	752	699	717	660	645	654	679
Hispanic	301	326	338	427	501	611	639	738	807
Other	584	603	625	613	661	726	706	798	781
Total	7,256	7,219	6,890	6,554	7,009	7,216	7,166	7,126	7,373

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

207

Providence, RI*

The yearly number of births in Providence fell from 3,428 in 1990 to 2,667 in 1998. This decline was most evident among whites, who accounted for 23 percent of Providence births in 1998, compared with 37 percent in 1990.** Hispanics accounted for 43 percent of Providence births in 1998.***

During the 1990s, Providence saw some important improvements, including a striking decline in the percentage of births to women who smoked during pregnancy. However, when compared with the 50-city average in 1998, Providence's children got off to a significantly less healthy start to life on four of eight indicators, including the share of births to teens (see figure).

More specifically:

- **Teen births.** During the 1990s, the percentage of births to teen mothers fluctuated, but did not exhibit a significant change from 1990 to 1998. In 1998, 18 percent of Providence births were to teens, compared with 15 percent of births in the 50 largest cities overall.
- **Repeat teen births.** The proportion of Providence teen births to young women who already had a child decreased from a high of 32 percent in 1991 to 26 percent in 1997 and 1998. In 1998, the percentage of teen births that were repeat births in Providence was not significantly different from the 50-city average.
- **Births to unmarried women.** The share of Providence births to unmarried women rose from 48 percent in 1990 to 56 percent in 1996, and then remained essentially stable thereafter. This overall increase widened the gap between Providence and the 50-city average.
- **Low maternal education.** There was a sizable drop in the percentage of births to mothers with less than 12 years of education during the 1990s, from a high of 36 percent in 1991 to a low of 29 percent in 1998. This decline brought Providence from well above the 50-city average in 1990 to closer to parity with the 50-city average in 1998.
- **Late or no prenatal care.** Already well below the 50-city average in 1990, the share of Providence births to mothers receiving late or no

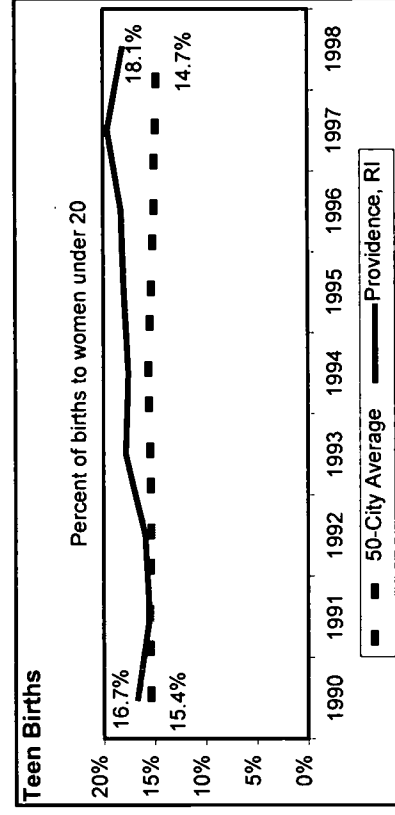
* Providence is not one of the 50 largest cities.

** Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

*** Hispanic origin was not reported or unknown for 10 percent of total births in 1998—up from only 6 percent in 1990. Consequently, the distribution of births by Hispanic origin is less reliable during the late 1990s. Nearly 80 percent of births with unknown Hispanic origin in 1998 were to white women.

- **Smoking during pregnancy.** During the 1990s, Providence saw a dramatic reduction in the share of births to mothers who smoked during pregnancy, from 21 percent in 1990 and 1991 to 13 percent in 1998. Smoking during pregnancy remained slightly more common in Providence than in the 50 largest cities overall throughout this time.
- **Low-birthweight births.** There was an overall increase in the percentage of Providence babies born at a low birthweight, from 8 percent in the early 1990s to 10 percent in 1997 and 1998. Meanwhile, the 50-city average remained steady at 9 percent.
- **Preterm births.** Overall, preterm births became a larger share of Providence births from 1990 to 1998, despite minor fluctuations throughout the period. In 1998, 14 percent of Providence births were preterm, compared with 13 percent of births in the 50 largest cities overall.

In summary, Providence saw some important improvements during the 1990s, including a substantial decline in the share of births to mothers who smoked during pregnancy and a notable drop in the already small percentage of births to women who received late or no prenatal care. At the same time, however, there were increases in the percentage of births to unmarried women and in the shares of preterm and low-birthweight births. Moreover, when compared with the 50-city average, Providence's children got off to a significantly less healthy start to life on four of eight indicators in 1998.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Providence, RI	16.7	15.5	15.9	17.8	17.6	18.0	18.2	19.6	18.1
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Providence, RI	30.0	32.0	30.9	30.1	27.1	26.4	26.8	25.6	25.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Providence, RI	48.1	50.2	50.3	53.8	53.8	54.3	56.2	56.4	55.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Providence, RI	34.5	36.0	34.9	35.8	34.0	32.8	32.5	33.2	29.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Providence, RI	3.8	3.5	3.0	2.8	2.8	2.3	2.2	3.0	2.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Providence, RI	20.6	21.4	17.7	18.3	16.3	14.5	13.4	14.0	12.7
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Providence, RI	7.7	7.7	7.7	8.3	7.9	8.5	7.9	9.5	9.5
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Providence, RI	11.9	12.2	13.1	12.5	12.7	12.1	11.6	12.5	14.4
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	1,261	1,140	1,018	961	855	678	632	604
	Black non-Hispanic	594	606	575	455	474	311	365	408
	Hispanic	1,007	852	1,015	1,057	1,039	972	1,073	1,142
	Other	566	561	599	634	523	550	567	513
	Total	3,428	3,159	3,207	3,107	2,891	2,672	2,629	2,667

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

See footnote * in text.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

BEST COPY AVAILABLE

210

Sacramento, CA

The yearly number of births in Sacramento decreased from 12,735 in 1990 to 10,616 in 1998. This change was due primarily to a substantial reduction in births to whites, who accounted for 39 percent of Sacramento births in 1998, compared with 51 percent in 1990.* Births to Hispanics accounted for about one-fourth of 1998 births.

From 1990 to 1998, Sacramento experienced only small changes in measures of a healthy start to life, and was close to the 50-city average on most measures. When compared with the 50-city average in 1998, Sacramento's children got off to a notably healthier start to life on two indicators—the percentage of births that were low-birthweight and the percentage of births that were preterm (see figure).

More specifically:

- **Teen births.** The percentage of births to teen mothers in Sacramento was not significantly different in 1998 than in 1990. In 1998, teen births accounted for 14 percent of births in Sacramento, which is not significantly different from the 50-city average for that year.
- **Repeat teen births.** The proportion of teen births to young women who were already mothers increased from 27 percent in 1990 to 30 percent in 1993, and then decreased to 26 percent in 1998. The slight overall change from 1990 to 1998, however, was not significant. In 1998, Sacramento was in line with the 50-city average.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, births to unmarried women accounted for 42 percent of Sacramento births, compared with 43 percent of births in the 50 largest cities overall.

- **Low maternal education.** The share of births to mothers with less than 12 years of education increased from 26 percent in 1990 to 31 percent in 1995 and then decreased to 28 percent in 1998. This overall increase from 1990 to 1998 contrasts with a downward trend in the 50 largest cities as a group.

- **Late or no prenatal care.** Sacramento experienced a slight drop over the 1990-1998 period in the percentage of births to women

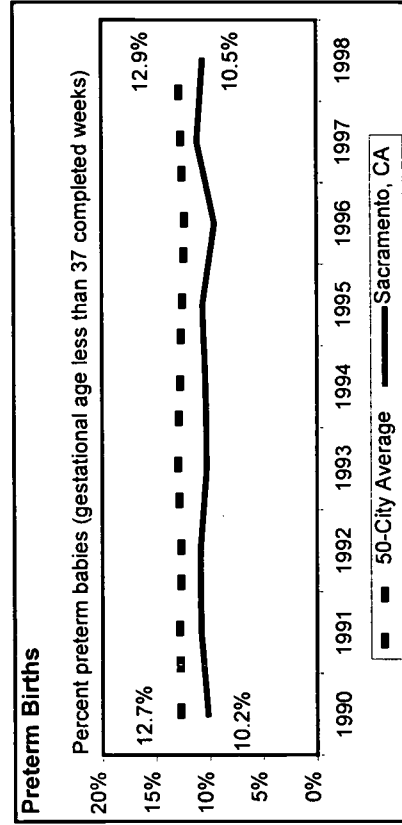
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

who received late or no prenatal care, from 7 percent in 1990 through 1994 to 6 percent in 1996 through 1998.*** The 50 largest cities overall experienced a more pronounced drop on this indicator from 1990 to 1998, bringing Sacramento from below the 50-city average in 1990 to simply on par with the 50-city average by 1998.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** Throughout the nine-year period, low-birthweight babies accounted for 7 percent of births in Sacramento, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** Over the 1990-1998 period, preterm births accounted for between 9 percent and 11 percent of births in Sacramento. Throughout this time, preterm births were less prevalent in Sacramento than in the 50 largest cities as a group, where a steady 13 percent of births were preterm.

In summary, when compared with the 50-city average in 1998, Sacramento's children got off to a notably healthier start to life on two important measures—the percentage of births that were preterm and the share of births that were low-birthweight. The city also witnessed a slight drop in the proportion of births to mothers who received late or no prenatal care. However, there was a small overall increase in the percentage of births to women with less than 12 years of education.



*** Data on prenatal care were not reliable for 1995. See Appendix 2 for more details.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Sacramento, CA	14.8	13.7	14.5	14.8	15.4	15.0	13.8	14.1	14.1
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Sacramento, CA	26.7	28.4	29.4	29.7	27.4	26.9	29.0	27.1	25.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Sacramento, CA**	36.2	36.5	36.1	37.4	40.6	38.5	37.3	41.8	42.0
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Sacramento, CA	26.3	28.8	30.0	28.2	30.8	31.5	29.1	28.8	27.7
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Sacramento, CA***	6.6	7.3	6.9	7.4	6.9	N.R.	6.2	6.0	5.9
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Sacramento, CA****	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Sacramento, CA	6.6	6.4	6.9	6.8	7.1	7.0	7.0	7.6	7.3
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Sacramento, CA	10.2	10.8	10.9	10.3	10.4	10.6	9.5	11.1	10.5
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	6,489	6,329	6,078	5,841	5,042	4,388	4,095	4,154
	Black non-Hispanic	2,046	2,055	2,085	2,091	1,954	1,736	1,783	1,800
	Hispanic	2,279	2,428	2,530	2,611	2,644	2,666	2,606	2,714
	Other	1,921	2,111	2,174	2,211	2,104	2,155	2,013	1,948
	Total	12,735	12,923	12,867	12,754	11,744	10,819	10,497	10,616

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.R. = Not Reliable. See Appendix 2 for more details.

****N.A. = Not Available. See Appendix 2 for more details.

*****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

San Antonio, TX

The yearly number of births in San Antonio rose from 18,805 in 1990 to 21,797 in 1998. This rise was particularly pronounced among Hispanics, who accounted for the majority of San Antonio births throughout the 1990-1998 period. In 1998, 66 percent of births in San Antonio were to Hispanics.

When compared with the 50-city average, San Antonio's children got off to a healthier start to life on five of eight measures in 1998. Moreover, San Antonio experienced several improvements during the 1990-1998 period, including drops in the already small percentages of births to mothers who received late or no prenatal care and births to mothers who smoked during pregnancy (see figure).

More specifically:

- **Teen births.** During the 1990s, teen births made up a consistently larger share of births in San Antonio than in the 50 largest cities overall. In 1998, 17 percent of births in San Antonio were to teenagers, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** Both San Antonio and the 50 largest cities as a group experienced an overall decrease from 1990 to 1998 in the percentage of teen births to young women who were already mothers. In 1998, repeat teen births accounted for 25 percent of San Antonio teen births, not significantly different from the 50-city average.
- **Births to unmarried women.** Births to unmarried women were substantially underreported during 1990-1993 in Texas.** In 1998, 31 percent of births in San Antonio were to unmarried women, compared with 43 percent in the 50 largest cities overall.
- **Low maternal education.** Births to women with less than 12 years of education became a smaller share of San Antonio births, dropping from 36 percent in 1990 to 31 percent in 1998. Although the city remained above the 50-city average throughout the 1990s, the gap narrowed considerably over this period.
- **Late or no prenatal care.** The percentage of San Antonio births to mothers receiving late or no prenatal care dropped from 5 percent in the early 1990s to 3 percent in 1995 through 1998. Moreover, San Antonio

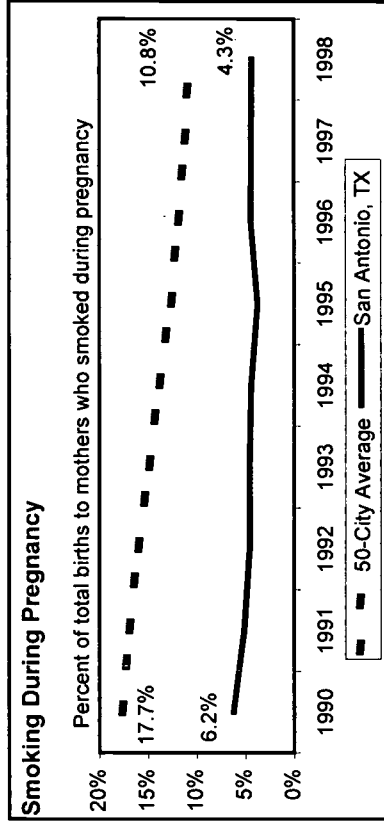
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** Trends can therefore be examined meaningfully only since 1994. See Appendix 2 for more details.

remained below the 50-city average on this indicator throughout the 1990-1998 period.

- **Smoking during pregnancy.** There was a sizable reduction in the proportion of births to mothers who smoked during pregnancy, from 6 percent in 1990 to 4 percent in 1994 through 1998. The 50 largest cities as a group also saw a marked decline in this measure during the 1990s. Throughout this time, smoking during pregnancy remained less common in San Antonio than in the 50 largest cities overall.
- **Low-birthweight births.** Low-birthweight births were less prevalent in San Antonio than in the 50 largest cities as a whole during the 1990-1998 period. Throughout this nine-year span, 7 percent of San Antonio births were low-birthweight, compared with 9 percent of births in the 50 largest cities overall.
- **Preterm births.** Preterm births accounted for between 11 percent and 13 percent of San Antonio births from 1990 through 1993 and 12 percent of births thereafter. San Antonio was just below the 50-city average for most of this time.

In summary, when compared with the 50-city average in 1998, the children of San Antonio got off to a healthier start to life on five of eight indicators. In addition, the city experienced several improvements over the 1990-1998 period, including drops in the proportions of teen births that were repeat births, births to mothers with less than 12 years of education, births to mothers receiving late or no prenatal care, and births to women who smoked during pregnancy.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
San Antonio, TX	18.0	17.5	17.2	17.8	17.5	17.7	16.9	17.5	17.1
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
San Antonio, TX	28.6	28.0	28.1	26.5	25.8	23.8	24.4	25.8	25.4
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
San Antonio, TX**	N.R.	N.R.	N.R.	N.R.	32.2	30.8	29.2	30.0	30.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
San Antonio, TX	36.1	34.9	34.8	33.6	32.2	32.3	31.6	31.9	30.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
San Antonio, TX	5.0	4.8	4.9	4.2	3.7	3.3	2.6	2.7	2.8
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
San Antonio, TX	6.2	5.1	4.6	4.6	4.4	3.7	4.4	4.4	4.3
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
San Antonio, TX	6.9	7.0	7.1	7.0	6.6	7.1	7.4	7.2	7.4
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
San Antonio, TX	11.4	12.9	11.4	12.5	11.9	11.7	12.1	12.1	12.4
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	5,292	5,244	5,651	5,673	5,800	5,734	5,520	5,664
	Black non-Hispanic	1,207	1,389	1,347	1,358	1,368	1,369	1,337	1,355
	Hispanic	12,088	12,653	12,944	13,388	13,592	13,957	14,248	14,325
	Other	218	243	305	327	419	417	399	453
	Total	18,805	19,529	20,247	20,746	21,179	21,477	21,504	21,797

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in San Diego declined from 22,082 in 1990 to 18,513 in 1998. This drop was evident among whites, blacks, and Hispanics. In 1998, 35 percent of births were to whites and 40 percent were to Hispanics.*

During the 1990s, San Diego saw a dramatic drop in the proportion of births to mothers who received late or no prenatal care (see figure). Two other noteworthy changes in measures of a healthy start to life include a decrease in the percentage of births to mothers with less than 12 years of education and a reduction in the already small share of births to teens.

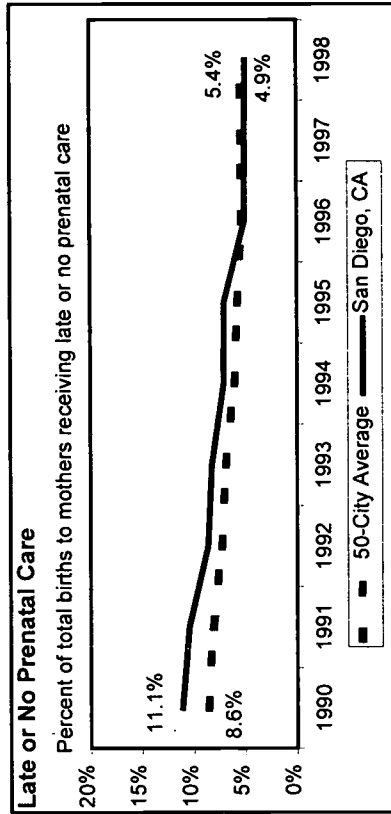
More specifically:

- **Teen births.** The percentage of births to teen mothers remained relatively stable at around 11 percent in 1990 through 1996 and then decreased slightly to 10 percent in 1997 and 1998. Throughout this time, teen births were substantially less common in San Diego than in the 50 largest cities as a group.
- **Repeat teen births.** Teen births to young women who were already mothers accounted for a relatively constant share of San Diego teen births during the 1990s. The city was below the 50-city average throughout this time. In 1998, repeat teen births accounted for 21 percent of teen births in San Diego, compared with 24 percent in the 50 largest cities overall.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, births to unmarried women accounted for 29 percent of San Diego births, compared with 43 percent of births in the 50 largest cities overall.
- **Low maternal education.** San Diego experienced a decline in the proportion of births to women with less than 12 years of education over the 1990-1998 period, from a high of 31 percent in 1991 and 1992 to less than 26 percent in 1998. This decrease brought San Diego below the 50-city average in the late 1990s.
- **Late or no prenatal care.** The percentage of births to mothers who received late or no prenatal care in San Diego fell from 11 percent in

1990 to 5 percent in 1996 through 1998, outpacing a similar downward trend in the 50 largest cities as a whole.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** Throughout the 1990-1998 period, the share of San Diego births that were low-birthweight remained relatively stable and below the average for the 50 largest cities overall. Throughout this time, low-birthweight babies accounted for about 6 percent of births in San Diego, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** Preterm births were less common in San Diego than in the 50 largest cities overall during the 1990s. Throughout this period, 10 percent of San Diego births were preterm, compared with 13 percent of births in the 50 largest cities overall.

In summary, when compared with the 50-city average, the children of San Diego got off to a healthier start to life on all seven available indicators in 1998. In addition, the city witnessed a striking reduction in the percentage of births to women who received late or no prenatal care, as well as notable decreases in the proportions of teen births and births to mothers with less than 12 years of education.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
San Diego, CA	11.3	11.4	11.1	10.8	11.1	10.5	10.6	9.5	9.6
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
San Diego, CA	22.3	21.6	23.3	23.6	21.2	20.5	20.9	22.0	21.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
San Diego, CA**	30.5	34.1	33.3	33.7	31.0	27.0	25.3	30.2	29.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
San Diego, CA	28.7	30.5	30.5	29.9	29.4	27.9	27.1	26.4	25.6
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
San Diego, CA	11.1	10.5	8.6	8.2	7.1	7.1	5.0	5.0	4.9
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
San Diego, CA***	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
San Diego, CA	6.1	5.8	6.0	6.5	6.2	5.9	6.3	5.9	6.1
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
San Diego, CA	10.1	9.8	10.0	10.3	10.5	10.1	10.1	9.8	10.3
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	8,803	8,168	8,116	7,127	7,273	7,276	6,433	6,436
	Black non-Hispanic	2,337	2,303	2,310	2,065	2,277	1,989	1,917	1,763
	Hispanic	8,283	8,671	8,915	8,317	8,369	7,845	7,491	7,493
	Other	2,659	2,755	2,842	4,034	3,189	2,914	2,903	2,821
	Total	22,082	21,897	22,183	21,543	21,108	20,024	19,636	18,513

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

San Francisco experienced a 20 percent decline in the yearly number of births, from 10,138 in 1990 to 8,157 in 1998. This decrease was particularly pronounced among blacks.* Throughout the 1990s, births to "Other" races (which were nearly all to Asian-Pacific Islanders) were more than a third of total births.

During this period, San Francisco saw marked drops in the share of teen births to young women who were already mothers (see figure) and in the percentages of all births to women with less than 12 years of education and to women who received late or no prenatal care.

More specifically:

- **Teen births.** Already well below the 50-city average of 15 percent, the proportion of San Francisco births to teenagers decreased over the 1990-1998 period. Teen births accounted for 6 percent of births in 1998, compared with 8 percent in 1990.
- **Repeat teen births.** The share of teen births to young women who were already mothers fluctuated somewhat, but underwent a large overall decline during the 1990-1998 period. Repeat teen births made up 21 percent of teen births in San Francisco in 1990, compared with 14 percent in 1998. In contrast, 24 percent of teen births in the 50 largest cities were repeat births in 1998.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, births to unmarried women were much less common in San Francisco than in the 50 largest cities as a whole. These births accounted for 24 percent of San Francisco births in 1998, compared with a 50-city average of 43 percent.
- **Low maternal education.** The share of total births to mothers with less than 12 years of education dropped from 27 percent in 1990 to 19 percent in 1998. This change brought San Francisco well below the 1998 50-city average of 27 percent.
- **Late or no prenatal care.** Over the 1990-1998 period, the proportion of San Francisco births to women who received late or no prenatal care

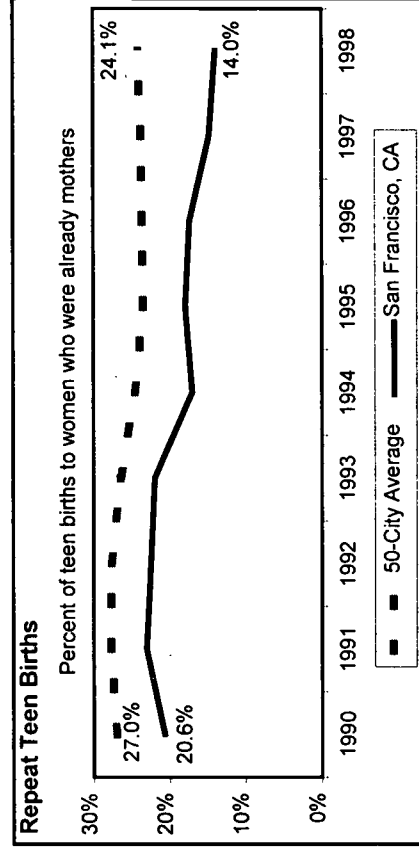
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

was cut in half—from 6 percent in 1990 and 1991 to 3 percent in 1996 through 1998. This improvement paralleled the downward trend in the 50 largest cities overall, and San Francisco remained below the 50-city average on this indicator throughout the 1990s.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** The proportion of San Francisco births that were low-birthweight remained stable and below the 50-city average during the 1990-1998 period. Low-birthweight babies accounted for 7 percent of births in San Francisco in 1990 and 1998, compared with 9 percent of births in the 50 largest cities.
- **Preterm births.** Throughout the 1990s, the percentage of preterm births in San Francisco remained well below the 50-city average. In 1998, preterm babies accounted for 9 percent of San Francisco births, compared with 13 percent in the 50 largest cities.

In summary, throughout the 1990s, the children of San Francisco got off to a healthier start to life on all seven available indicators, when compared with the 50-city average. Moreover, the city experienced considerable reductions in two important measures—the percentage of births to women who received late or no prenatal care and the proportion of teen births that were repeat births. Significant drops in the percentages of births that were to teenagers and of births to women with less than 12 years of education are also noteworthy.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
San Francisco, CA	8.2	8.4	7.6	7.4	7.6	7.6	7.2	7.3	6.1
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
San Francisco, CA	20.6	23.0	22.4	21.9	17.0	17.9	17.3	14.8	14.0
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
San Francisco, CA**	31.0	31.5	31.4	30.5	31.2	27.7	28.4	27.5	24.4
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
San Francisco, CA	26.7	26.0	24.8	23.2	22.8	22.1	22.1	21.2	19.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
San Francisco, CA	6.1	5.7	4.8	4.0	4.4	4.1	2.6	3.0	3.0
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
San Francisco, CA***	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
San Francisco, CA	6.7	7.5	6.4	6.9	6.7	7.1	6.7	6.6	7.2
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
San Francisco, CA	9.8	9.7	9.1	9.7	8.6	9.5	9.3	9.0	9.4
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	2,932	2,795	2,664	2,590	2,577	2,584	2,630	2,728
	Black non-Hispanic	1,467	1,401	1,291	1,196	1,161	1,028	888	793
	Hispanic	2,217	2,257	2,251	2,066	2,042	1,908	1,885	1,934
	Other	3,522	3,421	3,405	3,178	3,287	3,043	2,847	2,855
	Total	10,138	9,874	9,611	9,030	9,067	8,598	8,204	8,157

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in San Jose decreased from 17,390 in 1990 to 16,288 in 1998. This decline was most evident in births to whites, which fell by 32 percent from 1990 to 1998.* Births in the "Other" race/ethnicity category, which were nearly all to Asians and Pacific Islanders, increased from 20 percent to 27 percent between 1990 and 1998.

During the 1990s, San Jose saw reductions in the proportions of births to mothers who received late or no prenatal care, to women who had less than 12 years of education, and to teens (see figure). Moreover, when compared with the 50-city average, the children of San Jose got off to a healthier start to life on all seven available indicators in 1998.

More specifically:

- **Teen births.** While births to teenagers accounted for 11 percent of San Jose births in the early 1990s, they were 9 percent of births in 1998. Throughout the 1990s, San Jose was substantially below the average for the 50 largest cities, where a steady 15 percent of births were to teens.
- **Repeat teen births.** The share of San Jose teen births to young women who already had a child stayed at or near 20 percent throughout the 1990s. During this same period, the 50-city average for this measure decreased, but was never as low as San Jose.
- **Births to unmarried women.** The trends in the proportion of births to unmarried women in the 1990s reflect, at least in part, changes in coding practices in the state of California.** In 1998, births to unmarried women accounted for 27 percent of San Jose births, compared with 43 percent of births in the 50 largest cities overall.
- **Low maternal education.** Over the 1990-1998 period, the percentage of births to women with less than 12 years of education decreased, from a high of 29 percent in 1992 and 1993 to 26 percent in 1997 and 1998. The 50 largest cities as a whole saw a similar decline on this measure during the nine-year period.
- **Late or no prenatal care.** San Jose experienced a marked reduction in the proportion of births to women who received late or no prenatal care

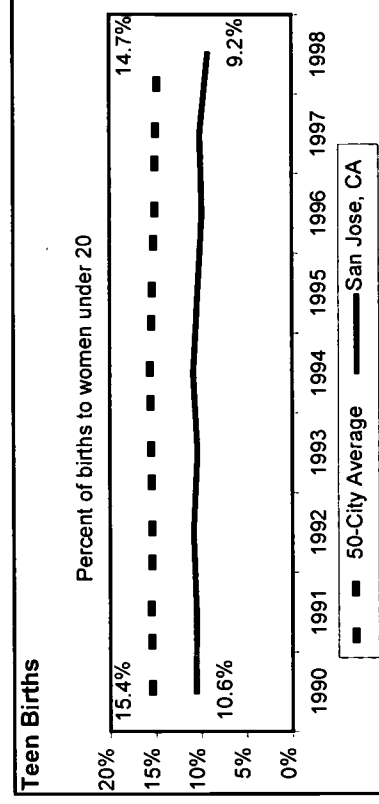
* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** In 1995 California changed the method by which it inferred marital status to take into account naming conventions of Hispanics. In 1997, California began asking for mother's marital status directly. For more details, see Appendix 2.

from 1990 to 1998, despite a temporary jump in 1995.*** Except for 1995, San Jose was below the 50-city average throughout the 1990s. In 1998, 3 percent of San Jose births were to women who received late or no prenatal care, compared with 5 percent in the 50 largest cities.

- **Smoking during pregnancy.** Data on smoking during pregnancy were not available for California births.
- **Low-birthweight births.** Low-birthweight babies made up a substantially smaller share of births in San Jose than in the 50 largest cities as a whole throughout the 1990s. In 1990 and 1998, 6 percent of births in San Jose were low-birthweight, compared with 9 percent in the 50 largest cities.
- **Preterm births.** During the 1990s, fewer than 10 percent of San Jose births were preterm. Throughout this time, preterm births accounted for a smaller percentage of San Jose births than in the 50 largest cities overall, where a steady 13 percent of births were preterm.

In summary, San Jose's children got off to a healthier start to life on all seven available indicators, when compared with the 1998 50-city average. In addition, the city saw notable declines in the percentages of teen births, births to mothers who received late or no prenatal care, and births to mothers with less than 12 years of education.



*** The reason for the temporary increase in 1995 in the percentage of births with late or no prenatal care is not known.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
San Jose, CA	10.6	10.5	10.9	10.4	10.9	10.4	9.9	10.1	9.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
San Jose, CA	19.8	22.3	20.7	20.9	19.4	20.5	19.2	18.8	19.9
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
San Jose, CA**	29.1	30.8	32.1	32.8	31.9	25.5	24.4	27.4	26.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
San Jose, CA	27.7	28.5	28.8	28.8	26.8	26.3	26.7	25.7	25.7
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
San Jose, CA***	4.9	5.2	4.7	4.7	5.3	6.9	3.6	3.1	3.1
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
San Jose, CA****	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
San Jose, CA	5.7	5.3	5.4	5.5	5.9	6.2	5.9	5.8	6.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
San Jose, CA	9.5	8.4	8.0	8.6	9.2	9.1	8.6	9.0	9.2
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
San Jose, CA*****									
White non-Hispanic	6,451	6,058	5,409	5,028	5,007	4,797	4,494	4,360	4,380
Black non-Hispanic	753	711	673	619	555	569	581	540	499
Hispanic	6,636	6,723	6,946	6,957	6,782	6,517	7,012	6,951	6,967
Other	3,550	3,932	3,992	4,013	3,988	3,905	4,139	4,302	4,442
Total	17,390	17,424	17,020	16,617	16,332	15,788	16,226	16,153	16,288

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**See text, footnote ** in text, and Appendix 2.

***See footnote *** in text.

****N.A. = Not Available. See Appendix 2 for more details.

*****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

BEST COPY AVAILABLE

231

The yearly number of births in Savannah decreased from 3,330 in 1990 to 2,655 in 1998. Throughout this period, the majority of Savannah births were to blacks, accounting for 58 percent of births in 1990 and 62 percent in 1998. Births to whites accounted for nearly all the rest.**

During the 1990s, Savannah experienced remarkable improvements in three important measures of a healthy start to life—the percentages of births to mothers with less than 12 years of education (see figure), births to mothers who received late or no prenatal care, and births to women who smoked during pregnancy all declined.*** However, there was also a marked rise in the share of births to unmarried women.

More specifically:

- **Teen births.** Teen births were substantially more common in Savannah than in the 50 largest cities as a group throughout the 1990s. In 1990 and 1998, births to teenagers accounted for 19 percent of Savannah births, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** The share of Savannah teen births to young women who already had a child fluctuated during the 1990s. It was 27 percent in 1998, not significantly different from the 50 largest cities overall.
- **Births to unmarried women.** Births to unmarried women rose from 46 percent of Savannah births in 1990 to 53 percent of births in 1998. This increase widened the gap between Savannah and the 50-city average on this indicator during the 1990s.
- **Low maternal education.** Over the 1990-1998 period, the share of births to women with less than 12 years of education fell, from a high of 28 percent in 1991 to a low of 21 percent in 1998. Throughout this time, Savannah remained below the 50-city average on this measure.
- **Late or no prenatal care.** Savannah saw a dramatic drop in the proportion of births to mothers receiving late or no prenatal care from 7 percent in 1990 to 4 percent in 1998. Throughout this time, births to women who received late or no prenatal care accounted for a smaller proportion of births in Savannah than in the 50 largest cities overall.

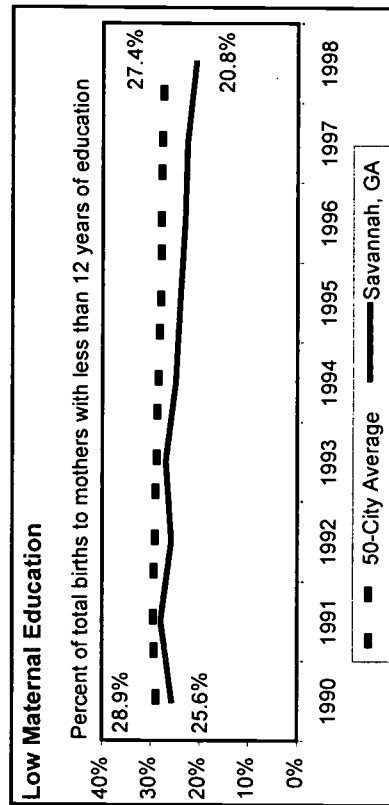
* Savannah is not one of the 50 largest cities.

** Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

*** Problems with geographic coding of city data have been identified for Georgia. These problems may affect the data throughout the 1990-1998 period. See Appendix 2 for more details.

- **Smoking during pregnancy.** The percentage of births to women who smoked during pregnancy in Savannah was cut in half over the 1990-1998 period. In 1998, 8 percent of Savannah births were to mothers who smoked during pregnancy, compared with 11 percent in the 50 largest cities overall.
- **Low-birthweight births.** The proportion of Savannah babies born at a low birthweight remained relatively stable but above the 50-city average throughout the 1990s. In 1990 and 1998, low-birthweight births accounted for 11 percent of births in Savannah, compared with 9 percent in the 50 largest cities overall.
- **Preterm births.** Preterm births were slightly more common in Savannah than in the 50 largest cities as a whole during the 1990s. While preterm births fluctuated between 13 percent and 16 percent of Savannah births during this time, they were a steady 13 percent of births in the 50 largest cities overall.

In summary, the percentages of Savannah births to women who received late or no prenatal care and to women who smoked during pregnancy were cut in half during the 1990s. Furthermore, when compared with the respective 50-city averages, Savannah's children got off to a healthier start to life on both of these measures throughout the 1990-1998 period. There was also a decrease in the proportion of births to women with less than 12 years of education. However, the share of births to unmarried women increased.



Trends In Key Indicators, 1990-1998

Indicator* **	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Savannah, GA	19.4	21.2	19.8	20.8	20.9	20.6	21.1	20.6	18.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Savannah, GA	30.7	31.1	32.7	32.2	23.9	26.6	26.7	25.8	26.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Savannah, GA	45.6	47.8	48.9	53.1	51.6	50.4	50.7	52.0	52.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Savannah, GA	25.6	27.9	25.8	27.0	24.9	24.1	23.1	22.6	20.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Savannah, GA	7.1	5.8	5.1	5.6	4.7	3.5	4.4	4.5	3.5
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Savannah, GA	15.9	13.4	14.4	11.3	9.1	9.0	8.7	7.8	7.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Savannah, GA	11.0	12.0	11.1	11.1	11.5	11.9	11.2	10.9	10.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Savannah, GA	15.7	16.2	15.3	16.2	13.4	13.9	13.2	12.9	15.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic								
	1,353	1,064	1,030	993	1,072	1,050	1,031	928	920
	Black non-Hispanic								
	1,924	1,827	1,832	1,852	1,800	1,613	1,568	1,611	1,646
	Hispanic								
Savannah, GA***	23	33	40	42	46	50	43	64	49
	Other								
	30	41	36	39	61	42	46	51	40
	Total								
	3,330	2,965	2,938	2,926	2,979	2,755	2,688	2,654	2,655

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

See footnote * in text and Appendix 2.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Seattle, WA

The yearly number of births in Seattle remained essentially stable throughout the 1990-1998 period. In 1990 there were 7,182 births; in 1998 there were 7,283. Births to Hispanics doubled during the 1990s, accounting for less than 4 percent of births in 1990 and more than 7 percent in 1998.* Births to Asian/Pacific Islanders and Native Americans accounted for one-fourth of Seattle births in 1998.

Throughout this time, when compared with the 50-city average, Seattle's children got off to a healthier start to life on all eight measures—including a strikingly lower percentage of births to teenagers (see figure). Seattle also experienced a marked reduction in the share of births to women who received late or no prenatal care.

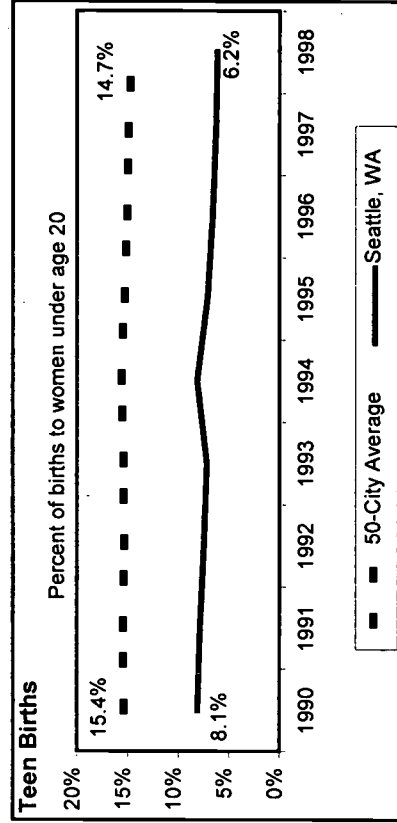
More specifically:

- **Teen births.** Already well below the stable 50-city average of 15 percent, the percentage of births to teens in Seattle declined during the 1990s. While teenagers accounted for 8 percent of births in 1994 (as in 1990), they accounted for only 6 percent in 1997 and 1998.
- **Repeat teen births.** The proportion of teen births to young women who were already mothers was fairly stable and remained substantially below the 50-city average between 1990 and 1998. In 1998, repeat births accounted for 19 percent of teen births in Seattle, compared with 24 percent in the 50 largest cities.
- **Births to unmarried women.** During the 1990s, births to unmarried women were much less common in Seattle than in the 50 largest cities as a group. In 1998, births to unmarried women made up 26 percent of births in Seattle, compared with 43 percent in the 50 largest cities.
- **Low maternal education.** Between 1992, when data first became available, and 1998, births to women with less than 12 years of education were a much smaller share of births in Seattle than in the 50 largest cities as a whole. In 1998, 11 percent of births in Seattle were to women with less than 12 years of education, compared with 27 percent in the 50 largest cities.
- **Late or no prenatal care.** During the 1990s, the proportion of Seattle births to women who received late or no prenatal care fluctuated but was substantially lower in 1998 than in 1990. While 6 percent of births were to women who received late or no prenatal care in 1990, only 3

percent were in 1998. Seattle remained below the 50-city average on this indicator in 1998.

- **Smoking during pregnancy.** The proportion of Seattle births to mothers who smoked during pregnancy fluctuated during the 1990s, from as high as 15 percent in 1992 to as low as 8 percent in 1997. At the same time, the 50 largest cities as a whole experienced a large decline in this measure. Nonetheless, Seattle remained below the 50-city average for maternal smoking throughout the 1990-1998 period.
- **Low-birthweight births.** Throughout the 1990s, low-birthweight births were less common in Seattle than in the 50 largest cities as a group. In both 1990 and 1998, about 7 percent of Seattle births were low-birthweight, compared with 9 percent of births in the 50 cities.
- **Preterm births.** Seattle had a consistently lower percentage of preterm babies than the 50-city average. Ten percent of Seattle babies were preterm in 1998, compared with 13 percent of babies in the 50 largest cities.

In summary, when compared with the 50-city average, Seattle's children got off to a healthier start to life on all eight measures throughout the 1990-1998 period. Seattle also showed a marked drop in the percentage of total births to women who received late or no prenatal care.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Seattle, WA	8.1	7.9	7.5	7.2	8.1	7.1	6.6	6.3	6.2
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Seattle, WA	20.2	21.6	21.2	20.9	18.5	19.7	17.1	18.4	18.6
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Seattle, WA	27.4	28.3	27.5	27.5	29.1	27.3	27.1	25.6	25.5
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Seattle, WA**	N.A.	N.A.	11.7	12.6	14.8	12.2	11.4	10.8	11.0
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Seattle, WA	5.9	4.9	3.7	3.2	3.6	4.9	5.2	2.6	2.7
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Seattle, WA	10.1	10.9	14.6	12.0	12.5	9.3	9.7	8.2	9.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Seattle, WA	6.6	6.1	6.0	5.3	6.1	6.0	6.2	6.3	6.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Seattle, WA	10.1	9.4	8.5	9.1	9.3	9.2	9.3	9.3	9.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	4,513	4,293	4,268	4,217	4,134	4,089	3,953	4,164
	Black non-Hispanic	861	918	842	939	866	773	771	739
	Hispanic	267	312	393	420	463	435	458	534
	Other	1,541	1,730	1,482	1,598	1,784	1,909	1,790	1,869
	Total	7,182	7,253	6,985	7,174	7,247	7,004	7,042	7,283

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.A. = Not Available. See Appendix 2 for more details.

***The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

239

St. Louis, MO

The yearly number of births in St. Louis declined substantially during the 1990s, from 8,511 in 1990 to 5,615 in 1998. The number of births decreased among both whites and blacks, who together accounted for the vast majority of births throughout the 1990-1998 period.

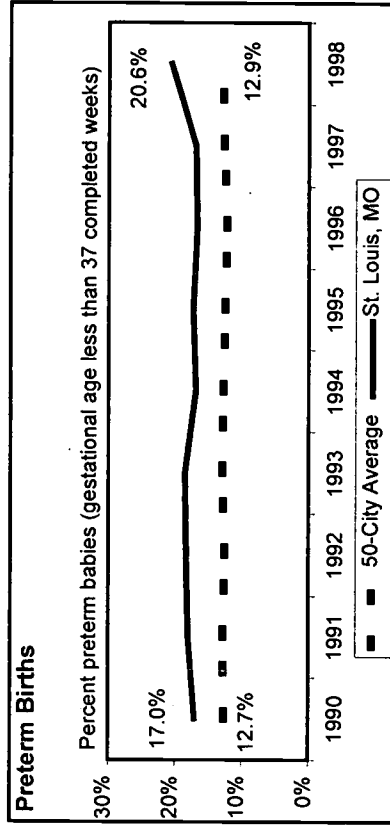
During the 1990s, St. Louis experienced striking reductions in the percentages of teen births to young women who already had a child, births to women with less than 12 years of education, and births to women who smoked during pregnancy. However, when compared with the 1998 50-city average, children in St. Louis got off to a less healthy start to life on all eight measures, including the share of births that were preterm (see figure). More specifically:

- **Teen births.** Although the percentage of births to teenagers dropped between 1990 and 1998, St. Louis was substantially above the 50-city average throughout this time. In 1998, 21 percent of St. Louis births were to teens, compared with 15 percent in the 50 largest cities overall.
- **Repeat teen births.** The percentage of St. Louis teen births to young women who were already mothers increased from 33 percent in 1990 to 38 percent in 1992, and then decreased to 27 percent by 1997 and 1998. In 1998, St. Louis was above the 50-city average of 24 percent.
- **Births to unmarried women.** The share of St. Louis births to unmarried women increased from 64 percent in 1990 to 67 percent in 1998. Throughout this time, St. Louis was dramatically above the average for the 50 largest cities overall, where births to unmarried women accounted for 43 percent of total births in 1998.
- **Low maternal education.** Births to mothers with less than 12 years of education remained more common in St. Louis than in the 50 largest cities overall throughout the 1990s. However, St. Louis saw a substantial drop in this measure, from 37 percent in 1990 to 32 percent in 1998, thus narrowing the gap with the 50-city average.
- **Late or no prenatal care.** During the 1990s, St. Louis experienced a decrease in the share of births to mothers who received late or no prenatal care, from a high of 10 percent in 1991 through 1993 to a low of 6 percent in 1997 and 1998. However, St. Louis was consistently above the 50-city average throughout this time.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** There was a dramatic reduction in the percentage of St. Louis births to mothers who smoked during pregnancy from 27 percent in 1990 to 17 percent in 1998. Despite this progress, St. Louis remained above the 50-city average throughout the nine-year period.
- **Low-birthweight births.** Low-birthweight births made up a consistently larger proportion of births in St. Louis than in the 50 largest cities overall throughout the 1990-1998 period. While low-birthweight babies accounted for between 11 percent and 13 percent of births in St. Louis over this time period, they were a steady 9 percent of births in the 50 largest cities overall.
- **Preterm births.** Preterm births made up between 17 percent and 19 percent of St. Louis births from 1990-1997 and 21 percent of births in 1998. These proportions are considerably higher than the 50-city average, which remained steady at around 13 percent throughout the 1990s.

In summary, St. Louis experienced sizable decreases in the proportions of teen births that were repeat births, births to women with less than 12 years of education, and births to women who smoked during pregnancy. Despite these improvements, children in St. Louis got off to a less healthy start to life on all eight measures in 1998, when compared with the 50-city average.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
St. Louis, MO	22.9	22.9	24.5	23.5	25.0	22.4	22.0	21.3	20.8
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
St. Louis, MO	33.3	36.0	37.6	35.4	31.6	29.9	27.9	27.1	27.2
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
St. Louis, MO	64.5	65.9	68.9	69.8	69.0	67.6	68.3	67.7	66.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
St. Louis, MO	36.9	37.3	38.8	37.5	37.0	33.9	34.3	33.4	32.2
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
St. Louis, MO	9.4	10.1	10.2	9.9	7.5	7.9	6.8	6.4	6.3
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
St. Louis, MO	26.7	25.3	25.0	23.0	19.6	17.3	17.6	18.2	16.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
St. Louis, MO	11.4	11.7	11.9	12.5	11.3	12.8	11.1	11.7	12.6
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
St. Louis, MO	17.0	18.0	18.3	18.5	16.9	17.3	16.7	16.9	20.6
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	2,857	2,733	2,302	2,277	2,080	1,953	1,871	1,822
	Black non-Hispanic	5,486	5,399	5,351	5,032	4,444	3,865	3,761	3,585
	Hispanic	66	67	65	65	71	76	80	88
	Other	102	115	130	118	126	134	142	152
	Total	8,511	8,314	7,848	7,492	6,721	6,028	5,765	5,615

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Tucson, AZ

Tucson experienced an increase in the yearly number of births during the 1990s from 8,415 births in 1990 to 10,872 births in 1998. This increase was most evident among Hispanics, for whom total births rose from 3,435 in 1990 to 5,015 in 1998.

During the 1990s, Tucson experienced both positive and negative changes in measures of a healthy start to life. The most striking improvement was a drop in the proportion of births to women who smoked during pregnancy (see figure). However, the share of Tucson births to unmarried women rose during this time.

More specifically:

- **Teen births.** Teen births ranged between 14 percent and 16 percent of Tucson births during the 1990-1998 period. In 1998, births to teen mothers made up a slightly larger share of births in Tucson than in the 50 largest cities overall.
- **Repeat teen births.** During the 1990s, the proportion of Tucson teen births to young mothers who already had a child fluctuated from as high as 26 percent in 1991 to as low as 19 percent in 1995. The city experienced an overall decrease from 1990 to 1998 on this measure and was below the 50-city average throughout this time.
- **Births to unmarried women.** The share of births in Tucson to unmarried women increased from 35 percent in 1990 to 40 percent in 1992, and then remained relatively stable through 1998. Throughout the 1990-1998 period, Tucson was consistently below the 50-city average on this measure.
- **Low maternal education.** The proportion of Tucson births to mothers with less than 12 years of education accounted for 29 percent of total births in 1990 and 27 percent in 1998. These levels were similar to the 50-city average for the same years.

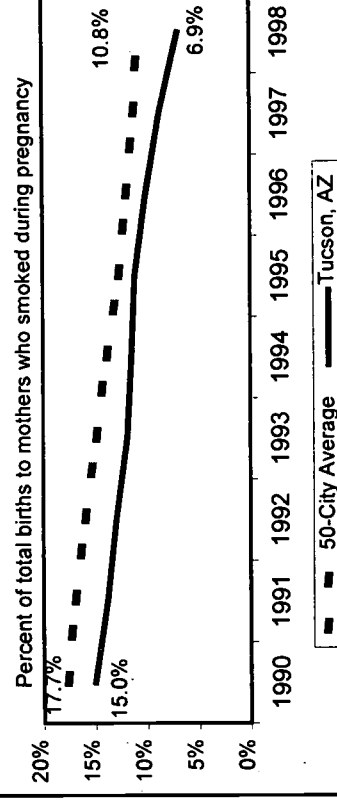
- **Late or no prenatal care.** Tucson experienced a sizable drop in the proportion of births to women receiving late or no prenatal care from 13 percent in 1990 to 7 percent in 1998. Nevertheless, Tucson was consistently above the 50-city average on this measure throughout the 1990-1998 period.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** The percentage of births to women who smoked during pregnancy in Tucson fell by more than half, from 15 percent in 1990 to 7 percent in 1998. Births to mothers who smoked during pregnancy made up a consistently smaller share of births in Tucson than in the 50 largest cities overall during the nine-year period.
- **Low-birthweight births.** Between 6 percent and 8 percent of Tucson babies were low birthweight during the 1990-1998 period. Throughout this time, Tucson was below the 50-city average on this indicator, which held steady at 9 percent.
- **Preterm births.** Preterm births accounted for a smaller percentage of births in Tucson than in the 50 largest cities as a whole throughout the 1990s. In 1998, 11 percent of Tucson babies were preterm, compared with 13 percent of births in the 50 largest cities overall.

In summary, when compared with the 50-city average, the children of Tucson got off to a significantly healthier start to life on five of eight measures in 1998. Furthermore, there were striking reductions during the 1990s in the proportions of births to mothers who smoked during pregnancy and births to mothers who received late or no prenatal care. There was also a decline in the share of teen births that were repeat births. However, the percentage of births to unmarried women rose during this time.

Smoking During Pregnancy



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Tucson, AZ	14.3	15.6	15.3	15.2	15.9	15.9	15.8	15.6	15.4
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Tucson, AZ	24.5	26.5	23.3	22.5	20.1	19.4	20.5	21.8	20.5
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Tucson, AZ	34.9	38.3	39.8	40.3	39.7	39.8	41.1	40.2	39.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Tucson, AZ	28.8	31.1	33.2	30.9	29.0	29.5	29.0	29.0	27.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Tucson, AZ	12.9	12.2	12.4	12.1	9.3	8.3	8.3	7.4	7.3
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Tucson, AZ	15.0	13.8	13.0	11.9	11.5	11.1	10.0	8.7	6.9
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Tucson, AZ	6.2	6.4	7.1	7.0	7.3	7.7	7.1	7.9	7.0
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Tucson, AZ	9.7	10.2	10.7	11.5	11.6	12.5	11.6	11.7	11.4
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother									
White non-Hispanic	4,368	4,006	4,025	3,957	3,983	3,734	3,738	3,661	4,848
Black non-Hispanic	303	327	292	327	300	276	287	314	323
Hispanic	3,435	3,712	3,932	4,112	4,150	4,065	4,371	4,422	5,015
Other	309	300	328	450	457	390	340	444	686
Total	8,415	8,345	8,577	8,846	8,890	8,465	8,736	8,841	10,872

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

The yearly number of births in Tulsa remained stable between 1990 and 1998. There were 6,615 births in 1990 and 6,658 in 1998. Whites accounted for 68 percent of births in 1991, when data for Hispanic origin first became available, and 61 percent in 1998.* The proportion of Hispanic births, though small, more than doubled during this time, from 4 percent in 1991 to 9 percent in 1998.

During the 1990s, the percentage of births in Tulsa to mothers receiving late or no prenatal care declined substantially. At the same time, there was a striking increase in the proportion of births to unmarried women (see figure).

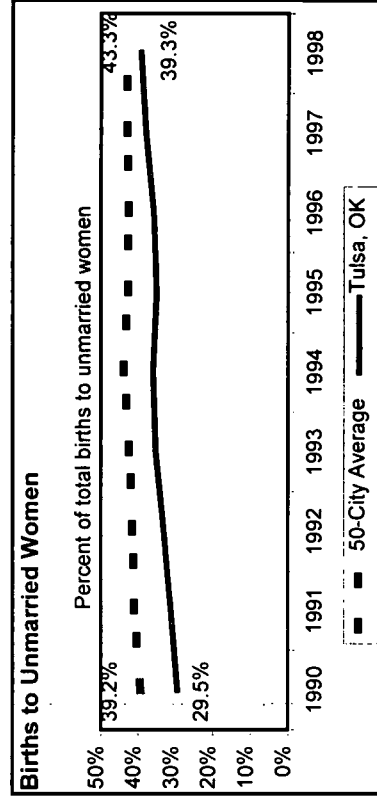
More specifically:

- **Teen births.** Teen births in Tulsa ranged between 15 percent and 17 percent of all births during the 1990s. In 1998, births to teens accounted for 15 percent of births in both Tulsa and the 50 largest cities overall.
- **Repeat teen births.** Between 1990 and 1996 the percentage of teen births to young women who already had a child fluctuated but dropped overall from 27 percent in 1990 to 23 percent in 1996. Data on repeat teen births in 1997 and 1998 are not shown due to considerable underreporting of birth order.**
- **Births to unmarried women.** Tulsa experienced a dramatic increase in the proportion of births to unmarried women from 30 percent in 1990 to 39 percent in 1998. This rise outpaced the upward trend of the 50 largest cities as a whole. However, Tulsa remained below the 50-city average throughout the nine-year period.
- **Low maternal education.** The percentage of births to women with less than 12 years of education increased from 22 percent in 1990 to 24 percent in 1997 and 1998. During the same period, the 50 largest cities as a group saw a decrease on this measure. Despite these trends, Tulsa remained below the 50-city average throughout this time.
- **Late or no prenatal care.** Births to mothers who received late or no prenatal care became a smaller share of Tulsa births, decreasing from 8 percent in the early 1990s to less than 6 percent in 1998. The 50 largest

cities overall also experienced a decrease on this measure during the nine-year period.

- **Smoking during pregnancy.** Smoking during pregnancy was consistently more prevalent in Tulsa than in the 50 largest cities as a group. In 1998, births to mothers who smoked during pregnancy accounted for 17 percent of Tulsa births, compared with 11 percent of births in the 50 largest cities.
- **Low-birthweight births.** Low-birthweight births accounted for 7 percent of Tulsa births in the early 1990s and 8 percent in 1996 through 1998. Throughout this period, Tulsa was below the average for the 50 largest cities, where a steady 9 percent of babies were low-birthweight.
- **Preterm births.** The percentage of preterm births rose from 10 percent in 1990-1992 to 12 percent in 1996-1998. Tulsa was slightly below the 50-city average on this measure throughout this time.

In summary, Tulsa experienced a substantial decrease in the percentage of births to mothers receiving late or no prenatal care but also a substantial increase in the proportion of births to unmarried women. Although Tulsa had percentages of nonmarital, low-birthweight, and preterm births that were below the 50-city average, the share of births to mothers who smoked during pregnancy was higher than the 50-city average in 1998.



* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

** If it is assumed that most of the births with birth order unknown are actually first-order births, the resulting percentage of repeat teen births for Tulsa in 1997 and 1998 is comparable to that in most other cities. See Appendix 2 for more details.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Tulsa, OK	15.1	15.9	14.9	15.6	15.9	15.3	16.6	15.9	15.5
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Tulsa, OK**	26.8	27.0	27.9	25.2	24.1	22.3	23.4	N.R.	N.R.
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Tulsa, OK	29.5	31.3	33.1	35.3	36.0	35.0	35.8	37.9	39.3
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Tulsa, OK	21.9	22.7	21.7	22.6	23.0	23.4	23.2	24.2	24.1
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Tulsa, OK	8.3	7.5	7.5	7.6	6.4	5.9	6.1	6.5	5.6
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Tulsa, OK***	N.A.	18.3	17.6	18.4	18.1	17.8	17.3	17.3	16.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Tulsa, OK	6.7	6.7	6.8	7.1	7.3	7.5	8.2	7.8	7.8
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Tulsa, OK	9.8	10.2	10.4	11.0	11.5	10.6	12.2	12.1	11.9
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	N.A.	4,611	4,284	4,246	4,079	3,875	4,042	4,077
	Black non-Hispanic	N.A.	1,366	1,263	1,287	1,241	1,149	1,273	1,285
	Hispanic	N.A.	252	283	286	294	333	442	501
	Other	N.A.	517	487	597	530	473	552	696
	Total	6,615	6,746	6,317	6,416	5,961	5,939	6,368	6,658

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**N.R. = Not Reliable. See text, footnote ** in text, and Appendix 2.

***N.A. = Not Available. See Appendix 2 for more details.

****The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

Virginia Beach, VA

The yearly number of births in Virginia Beach decreased from 7,663 in 1990 to 6,369 in 1998. This drop is attributable to a reduction in births to whites. While whites accounted for 77 percent of Virginia Beach births in 1990, they were 67 percent of births in 1998.*

When compared with the 1998 50-city average, the children of Virginia Beach got off to a significantly healthier start to life on six of eight measures, including the share of births to mothers with less than 12 years of education (see figure). The most striking changes during the 1990s include a sharp decrease in the percentage of births to mothers who smoked during pregnancy and a substantial increase in the proportion of births to unmarried women.

More specifically:

- **Teen births.** Teen births made up a considerably smaller share of births in Virginia Beach than in the 50 largest cities as a whole throughout the 1990-1998 period. In 1998, births to teenagers accounted for 10 percent of Virginia Beach births, compared with 15 percent of births in the 50 largest cities overall.
- **Repeat teen births.** From 1990 to 1998, there was no significant change in the percentage of Virginia Beach teen births to young women who already had a child. However, Virginia Beach was below the 50-city average throughout this period. In 1998, repeat teen births accounted for 17 percent of births in Virginia Beach, compared with 24 percent in the 50 largest cities overall.

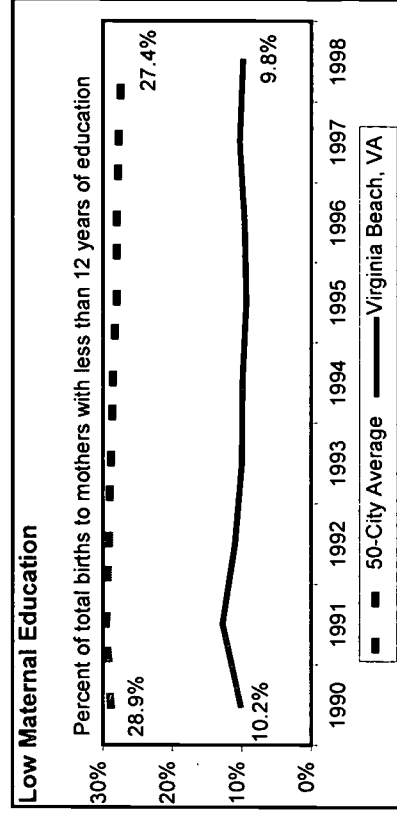
- **Births to unmarried women.** The proportion of births to unmarried women rose from 17 percent in 1990 to 26 percent in 1998. This increase outpaced a similar upward trend among the 50 largest cities as a group. However, the percentage of Virginia Beach births to unmarried women remained well below the 50-city average of 43 percent in 1998.

- **Low maternal education.** Throughout the 1990s, the proportion of births to Virginia Beach mothers with less than 12 years of education was dramatically below the 50-city average. In 1998, births to mothers with less than 12 years of education accounted for 10 percent of births in Virginia Beach, compared with 27 percent in the 50 largest cities overall.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Late or no prenatal care.** Births to women who received late or no prenatal care accounted for between 2 percent and 4 percent of Virginia Beach births over the 1990-1998 period. At 3 percent in 1998, Virginia Beach was below the 50-city average of 5 percent on this measure.
- **Smoking during pregnancy.** Virginia Beach experienced a striking drop in the percentage of births to mothers who smoked during pregnancy during the 1990s, from 16 percent in 1990 to 10 percent in 1998. This change paralleled a similar downward trend among the 50 largest cities as a whole.
- **Low-birthweight births.** The share of low-birthweight births in Virginia Beach increased from 6 percent in 1990 to 8 percent in 1998. Despite this rise, Virginia Beach remained below the steady 50-city average of 9 percent during the nine-year period.
- **Preterm births.** The percentage of preterm births rose from 10 percent in 1990 to 12 percent in 1998. In 1998, Virginia Beach was not significantly different from the 50-city average.

In summary, over the 1990-1998 period, Virginia Beach experienced a remarkable drop in the proportion of births to women who smoked during pregnancy, as well as reductions in the percentages of teen births that were repeat births and births to women receiving late or no prenatal care. Moreover, Virginia Beach's children got off to a significantly healthier start to life on six of eight measures in 1998, when compared with the 50-city average. However, there was a substantial increase during the 1990s in the share of births to unmarried women as well as smaller increases in the proportions of low-birthweight births and preterm births.



Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Virginia Beach, VA	8.9	9.2	8.3	8.3	9.6	9.4	9.4	9.7	9.7
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Virginia Beach, VA	19.4	17.9	17.9	15.7	17.7	15.0	17.5	16.8	17.3
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Virginia Beach, VA	17.5	20.6	20.7	21.5	23.6	23.8	25.0	25.4	25.8
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Virginia Beach, VA	10.2	12.8	11.0	10.0	9.9	9.4	9.6	10.3	9.8
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Virginia Beach, VA	4.3	3.7	3.6	2.4	2.7	2.4	2.7	2.6	3.0
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Virginia Beach, VA	16.3	15.3	15.0	14.9	14.6	13.3	12.0	10.7	10.2
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Virginia Beach, VA	6.1	7.1	6.5	6.9	7.2	7.2	7.3	7.1	7.9
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Virginia Beach, VA	9.7	10.6	10.1	11.2	10.4	11.0	11.2	11.3	12.1
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic	5,907	5,513	5,735	5,347	5,127	4,792	4,397	4,279
	Black non-Hispanic	1,294	1,304	1,455	1,442	1,428	1,321	1,334	1,403
	Hispanic	169	171	211	245	260	230	288	302
	Other	293	278	291	296	295	347	326	381
	Total	7,663	7,266	7,692	7,330	7,110	6,690	6,414	6,369

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

254

BEST COPY AVAILABLE

Washington, DC

The yearly number of births in Washington, DC dropped markedly during the 1990-1998 period, from 11,850 in 1990 to 7,686 in 1998. Births to blacks accounted for the vast majority of total births throughout this period, including about three of every four births in 1998.* The drop in births was due primarily to a consistent decline in births to blacks since 1991, but all groups experienced declines.

During this same time period, DC saw improvements on all eight measures of a healthy start to life. The most striking changes were drops in the percentages of births to mothers who smoked during pregnancy and to mothers who received late or no prenatal care (see figure).

More specifically:

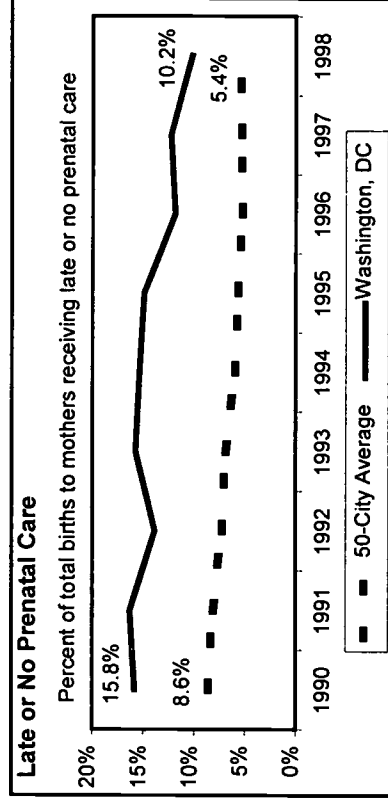
- **Teen births.** The proportion of births to teenagers declined during the 1990s, falling from 18 percent in 1990 to 15 percent in 1998. This trend brought teen births in Washington, DC in line with the 50-city average, which was stable during the 1990s at 15 percent.
- **Repeat teen births.** The proportion of teen births to young women who were already mothers fluctuated during the nine-year period, from as high as 35 percent in 1993 to as low as 28 percent in 1998.
- **Births to unmarried women.** The percentage of births to unmarried women rose from 65 percent in 1990 to a high of 69 percent in 1994, and then dropped to 63 percent in 1998. Throughout this time, births to unmarried women were markedly more common in DC than in the 50 largest cities overall.
- **Low maternal education.** Births to women with less than 12 years of education became a smaller share of total births during the 1990s, falling from 31 percent in 1990 to 25 percent in 1998. In 1990, Washington, DC was above the 50-city average on this measure. By 1998, DC was two percentage points below the 50-city average.

- **Late or no prenatal care.** There was a striking improvement in prenatal care in Washington, DC during the 1990s, mirroring the trend in the 50 largest cities as a group. The percentage of total births to women who received late or no prenatal care dropped from 16 percent in 1990 to 10 percent in 1998. However, DC remained well above the 50-city average on this measure in 1998.

* Data for whites and blacks exclude Hispanics. Persons of Hispanic origin may be of any race.

- **Smoking during pregnancy.** There was a dramatic decline in smoking during pregnancy that surpassed the downward trend in the 50 largest cities as a group. The percentage of total births to Washington, DC mothers who smoked during pregnancy fell from 16 percent in 1990 to 5 percent in 1998. DC was below the 50-city average on this indicator throughout the 1990-1998 period.
- **Low-birthweight births.** The percentage of low-birthweight babies fell from 15 percent in 1990 to 13 percent in 1998. This decline narrowed the gap between Washington, DC and the 50-city average.
- **Preterm births.** A slight overall decline in the percentage of births that were preterm – from 21 percent in 1990 to 18 percent in 1998 – brought DC closer to the 50-city average of 13 percent.

In summary, Washington, DC experienced improvements in all eight indicators during the 1990s, including especially striking reductions in the percentages of births to mothers who smoked during pregnancy and to mothers who received late or no prenatal care. Other sizable changes include drops in the percentages of births to teens and to women with less than 12 years of education.



** To compare DC with the 50 states, see *The Right Start: State Trends*.

Trends In Key Indicators, 1990-1998

Indicator*	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percent of total births to teens									
Washington, DC	17.8	17.4	16.3	17.4	16.4	16.3	16.7	15.6	15.3
50-City Average	15.4	15.5	15.4	15.4	15.6	15.3	15.1	14.9	14.7
Percent of teen births to women who were already mothers									
Washington, DC	31.0	33.0	34.5	34.9	32.1	30.1	31.0	31.0	28.0
50-City Average	27.0	27.8	27.7	26.5	24.5	23.4	23.7	23.6	23.7
Percent of total births to unmarried women									
Washington, DC	64.9	66.3	66.9	67.8	68.8	65.8	66.1	63.6	62.9
50-City Average	40.8	42.8	43.5	44.6	43.9	42.8	42.7	43.0	43.3
Percent of total births to mothers with less than 12 years of education									
Washington, DC	31.2	31.4	30.1	31.9	31.5	28.9	30.1	26.5	25.2
50-City Average	28.9	29.6	29.2	28.9	28.6	28.1	28.0	27.7	27.4
Percent of total births to mothers receiving late or no prenatal care									
Washington, DC	15.8	16.3	13.9	15.8	15.4	14.9	11.8	12.3	10.2
50-City Average	8.6	8.1	7.3	6.9	6.0	5.7	5.3	5.4	5.4
Percent of total births to mothers who smoked during pregnancy									
Washington, DC	16.3	13.2	13.0	10.2	9.7	8.3	7.0	5.5	4.8
50-City Average	17.7	17.0	16.0	14.9	13.9	12.7	11.9	11.2	10.8
Percent low-birthweight births (less than 5.5 lbs)									
Washington, DC	15.1	15.4	14.3	14.6	14.2	13.4	14.3	13.4	13.1
50-City Average	8.6	8.8	8.7	8.8	8.8	8.8	8.7	8.8	8.8
Percent preterm births (less than 37 completed weeks of gestation)									
Washington, DC	20.7	20.5	18.7	20.3	19.9	18.5	18.4	18.3	18.5
50-City Average	12.7	12.8	12.6	12.9	12.8	12.5	12.3	12.6	12.9
Number of births by Race and Ethnicity of mother	White non-Hispanic								
	1,640	1,401	1,319	1,355	1,260	1,354	1,247	1,274	1,314
	Black non-Hispanic								
	9,030	9,185	8,521	8,154	7,618	6,736	6,131	5,677	5,435
	Hispanic								
Washington, DC**	890	865	893	930	850	685	777	694	730
Other									
	290	325	227	190	202	239	235	282	207
Total									
	11,850	11,776	10,960	10,629	9,930	9,014	8,390	7,927	7,686

*For a complete definition and a list of sources for each of the nine indicators, please see Appendix 2.

**The Other category consists of Asian-Pacific Islanders, American Indians, and whites and blacks where Hispanic origin is unknown.

258

BEST COPY AVAILABLE

259

RESOURCES

260

261

Appendix 1: Cities Ranked by Indicator, 1998

Percent of total births to teens

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	14.7	29	Tucson, AZ	15.4
1	San Francisco, CA	6.1	30	Indianapolis, IN	15.5
2	Seattle, WA	6.2	30	Tulsa, OK	15.5
3	Honolulu, HI	7.4	32	Albuquerque, NM	15.9
4	San Jose, CA	9.2	32	Kansas City, MO	15.9
5	San Diego, CA	9.6	34	El Paso, TX	16.2
6	Virginia Beach, VA	9.7	35	Oklahoma City, OK	16.4
7	New York, NY	9.8	36	Phoenix, AZ	17.0
8	Boston, MA	10.6	37	Atlanta, GA	17.1
9	Charlotte, NC	10.8	37	San Antonio, TX	17.1
10	Portland, OR	11.3	39	Fort Worth, TX	17.4
11	Omaha, NE	11.9	39	Dallas, TX	17.4
12	Los Angeles, CA	12.2	41	Fresno, CA	17.9
13	Las Vegas, NV	12.3	42	Chicago, IL	18.0
14	Long Beach, CA	12.5	43	Philadelphia, PA	18.2
15	Colorado Springs, CO	12.8	44	Detroit, MI	19.3
16	Mesa, AZ	12.9	45	Milwaukee, WI	20.1
17	Oakland, CA	13.2	46	Cleveland, OH	20.7
18	Pittsburgh, PA	13.4	47	St. Louis, MO	20.8
19	Austin, TX	13.7	48	Memphis, TN	20.9
20	Minneapolis, MN	13.9	49	New Orleans, LA	21.2
21	Sacramento, CA	14.1	50	Baltimore, MD	22.4
22	Miami, FL	14.7			
22	Columbus, OH	14.7			
24	Nashville-Davidson, TN	14.8			
25	Jacksonville, FL	14.9			
26	Houston, TX	15.2			
27	Washington, DC	15.3			
27	Denver, CO	15.3			

Cities Not Included in

Largest 50-City Average

Des Moines, IA	14.4
Hartford, CT	24.8
Louisville, KY	17.2
Providence, RI	18.1
Savannah, GA	18.8

Percent of teen births to women who were already mothers

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average*	23.7	27	Philadelphia, PA	24.8
1	Honolulu, HI	13.9	30	Kansas City, MO	25.2
2	San Francisco, CA	14.0	31	San Antonio, TX	25.4
3	Boston, MA	16.5	32	Sacramento, CA	25.9
4	Virginia Beach, VA	17.3	32	Baltimore, MD	25.9
5	Albuquerque, NM	17.6	34	Austin, TX	26.0
6	New York, NY	18.2	35	Detroit, MI	26.3
7	Seattle, WA	18.6	36	Charlotte, NC	26.5
8	Colorado Springs, CO	19.7	37	St. Louis, MO	27.2
9	Omaha, NE	19.8	38	Chicago, IL	27.5
10	Portland, OR	19.9	39	El Paso, TX	27.6
10	San Jose, CA	19.9	40	Dallas, TX	28.0
12	Tucson, AZ	20.5	40	Long Beach, CA	28.0
13	San Diego, CA	21.3	40	Washington, DC	28.0
14	Mesa, AZ	21.4	43	Cleveland, OH	28.5
15	Los Angeles, CA	21.5	44	Minneapolis, MN	28.6
16	Oakland, CA	21.8	45	Fresno, CA	28.8
17	Houston, TX	22.3	46	Memphis, TN	28.9
17	Denver, CO	22.3	47	Milwaukee, WI	30.6
19	Pittsburgh, PA	22.6	48	Atlanta, GA	32.3
20	Miami, FL	23.1		Oklahoma City, OK**	N.R.
21	Indianapolis, IN	23.7		Tulsa, OK**	N.R.
22	Jacksonville, FL	23.9			
23	Las Vegas, NV	24.1			
24	Fort Worth, TX	24.3			
25	Nashville-Davidson, TN	24.4			
26	New Orleans, LA	24.5			
27	Columbus, OH	24.8			
27	Phoenix, AZ	24.8			

* In addition to the 5 cities that are never included in the computation of the 50-city averages, Oklahoma City and Tulsa have been excluded from the average as well.

**N.R. - Not Reliable

Appendix 1: Cities Ranked by Indicator, 1998

Percent of total births to unmarried women

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	43.3	28	Fresno, CA	43.1
1	San Francisco, CA	24.4	30	Indianapolis, IN	43.4
2	Honolulu, HI	25.3	31	Long Beach, CA	43.5
3	Seattle, WA	25.5	32	Columbus, OH	43.7
4	Virginia Beach, VA	25.8	33	Boston, MA	44.8
5	San Jose, CA	26.9	34	New York, NY	45.8
6	Colorado Springs, CO	27.2	34	Phoenix, AZ	45.8
7	San Diego, CA	29.3	36	Dallas, TX	46.2
8	San Antonio, TX	30.5	37	Pittsburgh, PA	47.6
9	Austin, TX	30.9	38	Kansas City, MO	48.9
10	Mesa, AZ	31.4	39	Miami, FL	52.2
11	El Paso, TX	33.0	40	Chicago, IL	53.3
12	Charlotte, NC	33.7	41	Atlanta, GA	56.2
13	Portland, OR	34.5	42	Milwaukee, WI	58.5
13	Omaha, NE	34.5	43	Philadelphia, PA	62.3
15	Las Vegas, NV	35.1	44	Washington, DC	62.9
16	Denver, CO	36.0	45	Memphis, TN	63.5
17	Houston, TX	37.7	46	New Orleans, LA	65.1
18	Fort Worth, TX	37.8	47	Cleveland, OH	65.7
19	Jacksonville, FL	38.9	48	St. Louis, MO	66.9
20	Oakland, CA	39.2	49	Baltimore, MD	70.2
21	Tucson, AZ	39.3	50	Detroit, MI	71.1
21	Tulsa, OK	39.3	Cities Not Included in Largest 50-City Average		
23	Los Angeles, CA	40.1		Des Moines, IA	38.5
24	Albuquerque, NM	40.6		Hartford, CT	78.2
25	Nashville-Davidson, TN	40.8		Louisville, KY	46.2
26	Sacramento, CA	42.0		Providence, RI	55.5
26	Oklahoma City, OK	42.0		Savannah, GA	52.8
28	Minneapolis, MN	43.1			

Percent of total births to mothers with less than 12 years of education

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	27.4	29	Sacramento, CA	27.7
1	Honolulu, HI	9.5	30	Memphis, TN	28.3
2	Virginia Beach, VA	9.8	31	Oklahoma City, OK	28.6
3	Seattle, WA	11.0	32	Atlanta, GA	29.4
4	Colorado Springs, CO	12.8	33	San Antonio, TX	30.8
5	Pittsburgh, PA	13.8	34	Austin, TX	31.8
6	Charlotte, NC	17.5	35	St. Louis, MO	32.2
7	San Francisco, CA	19.0	36	Baltimore, MD	32.4
8	Omaha, NE	19.5	37	Oakland, CA	33.0
9	Jacksonville, FL	19.6	38	Cleveland, OH	33.3
10	Portland, OR	19.8	39	Detroit, MI	34.0
11	Boston, MA	21.4	40	Denver, CO	34.7
12	Mesa, AZ	21.7	41	Milwaukee, WI	34.9
12	Columbus, OH	21.7	42	Chicago, IL	36.4
14	Albuquerque, NM	23.4	43	El Paso, TX	36.6
15	Kansas City, MO	23.6	44	Long Beach, CA	38.1
16	Indianapolis, IN	23.8	44	Fort Worth, TX	38.1
17	Tulsa, OK	24.1	46	Phoenix, AZ	39.9
18	Nashville-Davidson, TN	24.9	47	Fresno, CA	40.9
19	New York, NY	25.0	48	Houston, TX	42.1
20	Minneapolis, MN	25.1	49	Dallas, TX	44.0
21	Washington, DC	25.2	50	Los Angeles, CA	45.3
22	San Diego, CA	25.6	Cities Not Included in Largest 50-City Average		
23	San Jose, CA	25.7		Des Moines, IA	21.4
24	Miami, FL	26.5		Hartford, CT	31.5
24	Las Vegas, NV	26.5		Louisville, KY	22.8
24	Philadelphia, PA	26.5		Providence, RI	29.1
27	Tucson, AZ	27.1		Savannah, GA	20.8
27	New Orleans, LA	27.1			

BEST COPY AVAILABLE

264

265

Appendix 1: Cities Ranked by Indicator, 1998

Percent of total births to mothers receiving late or no prenatal care

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	5.4	28	New Orleans, LA	5.6
1	Honolulu, HI	1.6	30	Milwaukee, WI	5.7
2	Charlotte, NC	2.5	31	Baltimore, MD	5.9
3	Oakland, CA	2.6	31	Sacramento, CA	5.9
4	Seattle, WA	2.7	31	Las Vegas, NV	5.9
5	San Antonio, TX	2.8	34	Oklahoma City, OK	6.2
6	Fresno, CA	3.0	35	St. Louis, MO	6.3
6	San Francisco, CA	3.0	36	Chicago, IL	6.4
6	Virginia Beach, VA	3.0	37	New York, NY	6.5
9	San Jose, CA	3.1	38	Denver, CO	6.6
9	Los Angeles, CA	3.1	38	Minneapolis, MN	6.6
9	Pittsburgh, PA	3.1	40	Tucson, AZ	7.3
12	Nashville-Davidson, TN	3.2	41	Philadelphia, PA	7.4
13	Boston, MA	3.4	42	Fort Worth, TX	7.7
14	Miami, FL	3.8	43	Memphis, TN	8.3
15	Portland, OR	3.9	44	Phoenix, AZ	8.5
16	Indianapolis, IN	4.0	45	Albuquerque, NM	8.6
17	Kansas City, MO	4.1	46	Detroit, MI	8.8
17	Omaha, NE	4.1	47	Cleveland, OH	10.1
17	Houston, TX	4.1	48	Washington, DC	10.2
20	Atlanta, GA	4.2	49	Columbus, OH	11.6
20	Colorado Springs, CO	4.2	50	El Paso, TX	12.5
22	Austin, TX	4.4		Cities Not Included in	
22	Mesa, AZ	4.4		Largest 50-City Average	
24	Jacksonville, FL	4.5		Des Moines, IA	3.7
24	Dallas, TX	4.5		Hartford, CT	6.7
26	Long Beach, CA	4.8		Louisville, KY	2.2
27	San Diego, CA	4.9		Providence, RI	2.5
28	Tulsa, OK	5.6		Savannah, GA	3.5

Percent of total births to mothers who smoked during pregnancy

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average*	10.8	29	Portland, OR	15.0
1	Miami, FL	2.1	30	Baltimore, MD	15.4
2	New Orleans, LA	2.4	31	Detroit, MI	16.0
3	El Paso, TX	3.2	32	Philadelphia, PA	16.4
4	Dallas, TX	3.6	33	Kansas City, MO	16.5
5	Austin, TX	3.8	34	St. Louis, MO	16.8
5	Houston, TX	3.8	34	Tulsa, OK	16.8
7	San Antonio, TX	4.3	36	Omaha, NE	18.2
7	New York, NY	4.3	37	Cleveland, OH	18.6
9	Washington, DC	4.8	38	Columbus, OH	18.7
10	Honolulu, HI	5.2	39	Milwaukee, WI	19.0
11	Fort Worth, TX	5.6	40	Oklahoma City, OK	19.2
12	Tucson, AZ	6.9	41	Pittsburgh, PA	24.0
12	Atlanta, GA	6.9		Fresno, CA**	N.A.
14	Phoenix, AZ	8.0		Indianapolis, IN**	N.A.
15	Mesa, AZ	8.1		Long Beach, CA**	N.A.
15	Boston, MA	8.1		Los Angeles, CA**	N.A.
17	Chicago, IL	8.8		Oakland, CA**	N.A.
18	Seattle, WA	9.2		Sacramento, CA**	N.A.
19	Charlotte, NC	9.4		San Diego, CA**	N.A.
20	Memphis, TN	9.5		San Francisco, CA**	N.A.
21	Virginia Beach, VA	10.2		San Jose, CA**	N.A.
22	Denver, CO	11.0		Cities Not Included in	
23	Nashville-Davidson, TN	11.3		Largest 50-City Average	
24	Las Vegas, NV	11.4		Des Moines, IA	24.4
25	Colorado Springs, CO	11.7		Hartford, CT	7.2
26	Jacksonville, FL	11.9		Louisville, KY	22.0
27	Albuquerque, NM	12.5		Providence, RI	12.7
27	Minneapolis, MN	12.5		Savannah, GA	7.8

*In addition to the 5 cities that are never included in the 50-city averages, all of the cities from California and Indiana with N.A.'s for their percentage have been excluded from the average as well.

**N.A. - Not Available

Percent low-birthweight births (less than 5.5 pounds)

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	8.8	28	Boston, MA	8.8
1	Mesa, AZ	5.9	30	Oakland, CA	9.0
2	San Jose, CA	6.0	31	Colorado Springs, CO	9.2
3	San Diego, CA	6.1	32	Pittsburgh, PA	9.3
4	Long Beach, CA	6.2	33	Miami, FL	9.5
5	Portland, OR	6.3	33	Charlotte, NC	9.5
6	Seattle, WA	6.6	35	Denver, CO	9.6
7	Los Angeles, CA	6.9	35	Indianapolis, IN	9.6
8	Fresno, CA	7.0	35	Milwaukee, WI	9.6
8	Phoenix, AZ	7.0	38	Nashville-Davidson, TN	9.7
8	Tucson, AZ	7.0	38	Kansas City, MO	9.7
11	San Francisco, CA	7.2	40	Jacksonville, FL	9.9
11	El Paso, TX	7.2	41	Chicago, IL	10.4
11	Honolulu, HI	7.2	42	Philadelphia, PA	11.0
14	Sacramento, CA	7.3	43	Cleveland, OH	11.2
14	Austin, TX	7.3	44	Atlanta, GA	11.4
16	San Antonio, TX	7.4	45	St. Louis, MO	12.6
17	Las Vegas, NV	7.5	46	Memphis, TN	12.8
18	Omaha, NE	7.6	46	New Orleans, LA	12.8
19	Minneapolis, MN	7.8	48	Washington, DC	13.1
19	Tulsa, OK	7.8	49	Detroit, MI	13.4
21	Houston, TX	7.9	50	Baltimore, MD	14.2
21	Virginia Beach, VA	7.9			
23	Albuquerque, NM	8.0			
23	Fort Worth, TX	8.0			
25	Oklahoma City, OK	8.4			
25	Dallas, TX	8.4			
27	Columbus, OH	8.6			
28	New York City, NY	8.8			
Cities Not Included in Largest 50-city average					
	Des Moines, IA	7.2			
	Hartford, CT	13.4			
	Louisville, KY	9.2			
	Providence, RI	9.5			
	Savannah, GA	10.6			

268

Percent preterm births (less than 37 completed weeks of gestation)

Rank	City	Percent	Rank	City	Percent
	Top 50-City Average	12.9	27	Denver, CO	12.7
1	San Jose, CA	9.2	30	Kansas City, MO	12.8
2	San Francisco, CA	9.4	31	Las Vegas, NV	12.9
3	Seattle, WA	9.9	31	Pittsburgh, PA	12.9
4	Portland, OR	10.0	31	Columbus, OH	12.9
5	Fresno, CA	10.3	34	Fort Worth, TX	13.0
5	San Diego, CA	10.3	35	Houston, TX	13.3
7	Sacramento, CA	10.5	36	Nashville-Davidson, TN	13.9
8	Minneapolis, MN	10.7	36	Indianapolis, IN	13.9
9	Colorado Springs, CO	10.8	38	Atlanta, GA	14.0
10	Mesa, AZ	10.9	38	Milwaukee, WI	14.0
11	Albuquerque, NM	11.0	40	Jacksonville, FL	14.1
12	Honolulu, HI	11.2	41	Miami, FL	14.3
13	Tucson, AZ	11.4	42	Chicago, IL	14.6
14	Los Angeles, CA	11.5	43	Philadelphia, PA	14.9
14	Oakland, CA	11.5	44	Cleveland, OH	15.4
16	Charlotte, NC	11.6	45	New Orleans, LA	17.1
16	Omaha, NE	11.6	46	Memphis, TN	17.3
18	Long Beach, CA	11.7	47	Baltimore, MD	18.1
19	Phoenix, AZ	11.8	48	Detroit, MI	18.2
20	Tulsa, OK	11.9	49	Washington, DC	18.5
20	Boston, MA	11.9	50	St. Louis, MO	20.6
20	El Paso, TX	11.9			
23	New York City, NY	12.0			
24	Austin, TX	12.1			
24	Virginia Beach, VA	12.1			
26	San Antonio, TX	12.4			
27	Oklahoma City, OK	12.7			
27	Dallas, TX	12.7			
Cities Not Included in Largest 50-city average					
	Des Moines, IA	12.5			
	Hartford, CT	14.3			
	Louisville, KY	14.3			
	Providence, RI	14.4			
	Savannah, GA	15.1			

BEST COPY AVAILABLE

269

Appendix 2: Definitions, Data Sources, and Reporting Issues

Introduction

This Appendix provides definitions for the measures in this report and for technical terms in the narrative. It also addresses situations where there have been changes or problems in the way data have been collected, coded or reported by state departments of health. Such changes can result in substantial year-to-year changes in statistics that are due, at least in part, to the change in the methodology used to collect and report the data rather than to actual changes in behavior. All data are reported by the mother's place of residence, not the place where the infant was born.

All percentages in the *text* are rounded to the nearest whole percent; all percentages in the *city tables* are rounded to the nearest tenth of a percent. Thus, 9.46 rounds to 9 percent in the text and 9.5 percent in the tables.

Definitions and data sources

Births to unmarried women (percent of total births to unmarried women) is the percentage of all births occurring to women who were unmarried at the time of the birth. In 1998, marital status was obtained from a direct question on the birth certificate in 48 states and the District of Columbia. In Michigan and New York, marital status was inferred from other information on the birth certificate. See the next section for more details.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Gap means the difference (measured in percentage points) between a percentage reported for a city and the comparable percentage for the 50 largest cities as a whole. For example, in 1998, 11 percent of births in Albuquerque were preterm, compared with 13 percent in the 50 largest cities. In this example, the gap is 2 percentage points.

Late or no prenatal care (percent of total births to mothers receiving late or no prenatal care) is the percentage of births that occurred to mothers who reported receiving prenatal care only in the third trimester of their pregnancy, or reported receiving no prenatal care. Birth certificates that did not report information about prenatal care were not included in this calculation. In four cities, there were reporting issues in some years. See the next section for more details.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Low-birthweight births (percent low-birthweight births) is the percentage of live births weighing less than 2,500 grams (5.5 pounds). Births of unknown weight were not included in these calculations.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Low maternal education (percent of total births to mothers with less than 12 years of education) is the percentage of women who had completed fewer than 12 years of education at the time of the birth. Birth certificates on which maternal education was not reported were not included in this calculation. Data on maternal education were not available for Seattle in the early 1990s. See the next section for more details.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Number of births by race and ethnicity of mother contains information about race/Hispanic origin of the mother. On birth certificates, as on most federal data collection forms, the question regarding whether a person is Hispanic is separate from the question asking whether a person is white, black, Asian or Pacific Islander, or Native American. Thus, people are asked to select a racial group and to indicate whether they are of Hispanic origin. A birth to a woman who reported that she was Hispanic and white would usually be included in figures for both of these groups. In order to create mutually exclusive categories, Hispanics were removed from the black and white racial categories in the tabulations presented here. This allows more meaningful comparisons between minorities and the group people typically think of when we say "white."

It should also be noted that these figures represent the race of the mother, not the race of the child. This is important because increasing numbers of children are born to parents of different races.

Births for which Hispanic origin was not reported are included in the "Other" category.

In 1990, data on Hispanic origin were not collected for Oklahoma City and Tulsa, OK. Data on race/ethnicity were less reliable for Hartford, CT, in the early 1990s than in the late 1990s. In El Paso, TX, non-Hispanic white births may have been underreported in 1997 and earlier years. See the next section for more details on each city.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Preterm births (percent preterm births) is the percentage of babies born with a gestational age of less than 37 completed weeks. Birth certificates that did not report gestational age were not included in this tabulation.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Repeat teen births (percent of teen births to women who were already mothers) is the percentage of births that were second or higher order births to mothers who were under the age of 20 at the time of the birth. Birth certificates that did not contain information on birth order were not included in this calculation.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Significant means *statistically* significant. The number of births reported for an area is essentially a complete count and is not subject to sampling error. (This is also true for births classified by various characteristics.) Nevertheless, when the number of births is used for analytic purposes, the number of events that actually occurred can be thought of as one in a large series of results that *could have* occurred under the same circumstances. When considered in this way, the number of births is subject to random variation.¹

In this volume, the difference in two percentages is considered statistically significant if the probability that the difference is due to random variation (in the sense of the previous paragraph) is less than 5 percent. All differences explicitly referred to in the text of this volume are statistically significant *whether or not* the term "significant" is present in the sentence.

Smoking during pregnancy (percent of total births to mothers who smoked during pregnancy) is the percentage of women who smoked during pregnancy. In 1998, data for smoking were not collected in NCHS' standard format in California and Indiana. See the next section for more details. Birth certificates on which information on smoking during pregnancy was not reported were not included in this calculation.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

Teen births (percent of total births to teens) was calculated by dividing the number of births to women under age 20 by the total number of births to

¹ For more information, see Technical Notes in Ventura, S.J., Martin, J.A., Curtin S.C., Mathews T.J., and Park M.M. (2000), "Births: Final data for 1998," *National Vital Statistics Reports*, Vol. 48, no. 3. Hyattsville, Maryland: National Center for Health Statistics.

women of all ages. It should be noted that this is not the same as a teen birth rate, which measures the risk that a teenager will give birth. The percentage of total births to women under age 20 is affected by the fertility of women over age 20, as well as the fertility of teenagers.

Sources: 1990-1998 Natality Data Set CD Series 21, numbers 2-9 and 11, National Center for Health Statistics.

The 50-City Average is the unweighted mean of the data for each of the 50 largest cities in 1997 (based on Census Bureau population estimates).² In other words, this figure is the average of the figures for each of the 50 cities without taking into consideration the size of each city. The average for each year is calculated using only those cities with reported and reliable data.

Trend, as used in this report, means a general upward or downward change in a percentage over a specific multi-year time period. For example, the general increase in the percentage of Albuquerque births that were to teens between 1990 and 1998 is an upward trend.

Reporting issues

Births to unmarried women.³ As of 2000, "births to unmarried women are identified by a question on the birth certificates of all but two States. . . . In the two States (Michigan and New York) that use inferential procedures to compile birth statistics by marital status . . . , a birth is inferred as nonmarital if either of these factors is present: a paternity acknowledgment⁴ was received or the father's name is missing."

However, in 1990, the first year included in this volume, six states used inferential procedures.⁵ Thus, during the 1990-1998 period covered by this volume, four states—California (1997), Connecticut (1998), Nevada (1997), and Texas (1994)—switched from using inferential procedures to using a direct question to identify births to unmarried women.⁶ At each of these transition points, there is the potential for the percentage of births to

² We are using 1997 population to determine the 50 largest cities to be consistent with the original *Right Start* data book.

³ Unless otherwise indicated, this discussion and all direct quotations are drawn from Ventura, S.J., and Bachrach, C.A. (2000), "Nonmarital Childbearing in the United States, 1940-99," *National Vital Statistics Reports*, vol. 48, no. 16. Hyattsville, Maryland: National Center for Health Statistics.

⁴ A paternity acknowledgment is an acknowledgment from a man who is not married to a child's mother that he is the child's father.

⁵ Ventura, S.J., and Martin, J.A. (1993), "Advance Report of Final Natality Statistics, 1990," *Monthly Vital Statistics Reports*, vol. 41, no. 9 (supplement). Hyattsville, Maryland: National Center for Health Statistics.

⁶ With the exception of Connecticut, these changes took place at the beginning of the year cited. The date of Connecticut's change was June 15.

unmarried women to change because of the change in the method of identifying births to unmarried women.

In addition, among those states using inferential procedures, in some states the inferential procedures changed during the 1990-1998 period. For example, in the counts of births to unmarried women submitted by Michigan to NCHS, births with paternity acknowledgments were counted as births to unmarried women beginning in 1994. Thus, there is an undercount of about 25 percent for births to unmarried women in Michigan between 1990 and 1993.

Finally, data for Las Vegas, NV, for 1995 and 1996 were affected by a computer processing error and are therefore not presented.

Table A2.1 summarizes the reporting transitions made by each of the affected states by providing the date of each change and the likely effect of the change in reporting as estimated by NCHS. Cities included in this volume are listed under their respective states. In some cases, reporting changes have substantial effects on the percentage of births to unmarried women that are included in the tables in this volume. In such cases, trend analysis is either impossible or must be limited to an abbreviated period. All such cases are indicated with footnotes in both the text and the table.

City of residence. Many people have a mailing address that uses the name of an incorporated city even though the address is not located within the corporate limits of that city. When asked if their address falls within the corporate limits of the city, some of these people answer (incorrectly) that it does. When this happens, births are attributed to the city incorrectly.

Scattered evidence suggests that this misreporting problem can be serious—especially in built-up but unincorporated suburban areas that share the name of an incorporated city or town. In such cases, the number of births attributed to a city or town can be substantially inflated, which, in turn, leads to an overstated birth rate.⁷

This problem has been documented for Georgia but may also affect data for other cities in this volume, especially cities whose names are used in mailing addresses that are located outside the corporate limits of the city.

Late or no prenatal care. There were several cities in which the percentage of women who received late or no prenatal care changed substantially between two consecutive years. In these situations, we consulted with both NCHS staff and staff of the appropriate state

department of health to check into the possibility that reporting problems were responsible, at least in part, for the changes. Table A2.2 summarizes the instances in which reporting problems were documented.

Low maternal education. In 1990 and 1991, the state of Washington did not require reporting of mother's educational attainment. Consequently, these data are not available for Seattle in those years.

Race and ethnicity. The number of El Paso births with Hispanic origin not reported was 411 in 1997, compared with 17 in 1998. Generally, when Hispanic origin is not reported, the mother is non-Hispanic, so it is likely that non-Hispanic white births were underreported in 1997 and earlier years.

Data on ethnicity for Hartford are less reliable in the early 1990s than in later years. In 1990, nearly 13 percent of Hartford births were coded as unknown/not stated for Hispanic origin of the mother.

In 1990, Oklahoma did not ask about Hispanic origin. Consequently, data on the race/ethnicity of births in Oklahoma City and Tulsa are not available in 1990.

In Providence, Hispanic origin was not reported or unknown for 10 percent of total births in 1998—up from only 6 percent in 1990. Consequently, the distribution of births by Hispanic origin is less reliable during the late 1990s than in the early 1990s. Nearly 80 percent of births with unknown Hispanic origin in 1998 were to white women.

Repeat teen births. In 1997 and 1998, the number of teen births in which birth order was unknown or not reported was extremely high in Oklahoma. Consequently, the statistics on the percentage of Oklahoma City and Tulsa teen births to women who were already mothers are not reliable in those years and are not reported in this volume. Generally, most births with birth order unknown are first births. If it is assumed that most of the births with birth order unknown are actually first-order births, the resulting percentage of repeat teen births for Oklahoma City and Tulsa is comparable to that in most other cities.

Smoking during pregnancy. Indiana did not report smoking during pregnancy on the birth certificate in a manner consistent with other states. Consequently, data on smoking during pregnancy are not available from NCHS for Indianapolis.

California asked its question on smoking in a form that was not compatible with the standard recommended by NCHS. Thus, data on smoking during pregnancy are not available for any cities in California.

⁷ MacDorman, M.F., and Gay, G.A. (1999). "State Initiatives in Geocoding Vital Statistics Data." *Journal of Public Health Management and Practice*, Vol. 5 No. 2, 91-93, 1999.

Appendix 2: Definitions, Data Sources, and Reporting Issues

Oklahoma began reporting smoking data on the birth certificate in 1991. Consequently, data on smoking during pregnancy are not available for Oklahoma City and Tulsa in 1990.

New York City began reporting of smoking during pregnancy in 1994.⁸

⁸ This paragraph is a direct quotation from Mathews T.J. (1998), "Smoking During Pregnancy, 1990-96," *National Vital Statistics Reports*; vol. 47, no. 10. Hyattsville, Maryland: National Center for Health Statistics.

TABLE A2.1.

Summary of reporting changes for births to unmarried women, 1990-1998

State/City	Year of change ⁹	Nature of change	Estimated effect of change
California Fresno Long Beach Los Angeles Oakland Sacramento San Diego San Francisco San Jose	1995	Changed methodology for inferring mother's marital status by taking into account the naming conventions of Hispanic mothers—especially the use of hyphenated surnames. If the child was given a double surname of the mother's and father's surnames, regardless of sequence, the mother's marital status was coded as "married." Began determining mother's marital status by direct question.	Nonmarital births to Hispanic women in California fell about 17 percent from 1994 to 1995, but nonmarital births declined for other race and ethnic origin groups as well. Thus, the drop in Hispanic nonmarital births was not solely the result of the methodological change. In 1997, nonmarital births to women aged 15-24 increased, while nonmarital births to older women decreased. These two changes were compensating, so that the overall levels of nonmarital births were only modestly higher in 1997 compared with 1996. The proportion of births to unmarried women was 33 percent in the first six months of 1998, compared with 29 percent in the last six months. It appears that the previous inferential procedures resulted in some overestimation of the number of nonmarital births.
Connecticut Hartford	1998 (June 15)	Began determining mother's marital status by direct question. Previously, inferred marital status by comparison of surnames of the parents and child.	NCHS estimates that there was underreporting of births to unmarried women of about 25 percent in Michigan for the 1990-1993 period. Thus, there is substantial discontinuity in the nonmarital birth data between 1993 and 1994.
Michigan Detroit	1994	Changed methodology for inferring mother's marital status by taking into account the number of births with paternity acknowledgments.	Nonmarital births are substantially overstated; consequently, the percentage is not reliable.
Nevada Las Vegas	1995-1996 1997	Computer processing error in 1995-1996. Began determining mother's marital status by direct question. Previously, inferred marital status by comparing the surnames of the mother, father, and child.	The proportion of births to unmarried women in Nevada based on the direct question is somewhat lower than the proportion based on the inferential procedures.
New York New York City	1997	Began assuming mother is unmarried if the father's name is missing from the birth certificate, or if a paternity affidavit was filed.	The reporting changes resulted in substantially lower percentages of nonmarital births. The proportion of nonmarital births was likely to have been overstated by about 20 percent prior to 1997.
Texas Austin Dallas El Paso Fort Worth Houston San Antonio	1994	Began determining mother's marital status by direct question.	The number of births to unmarried women was underreported during the years 1990-1993. Thus, there is a considerable discontinuity in the data for all Texas cities between 1993 and 1994, when the reported proportion of births to unmarried women increased from 17 to 29 percent statewide.

Sources: Ventura, S.J., Martin, J.A., Curtin S.C., Mathews T.J., and Park M.M. (2000), "Births: Final data for 1998," *National Vital Statistics Reports*; Vol. 48, no. 3. Hyattsville, Maryland: National Center for Health Statistics. Ventura, S.J., Bachrach, C.A. (2000), "Nonmarital childbearing in the United States, 1940-1999," *National Vital Statistics Reports*, Vol. 48, No. 16. Hyattsville, MD: National Center for Health Statistics.

⁹ All changes occurred at the beginning of the year unless otherwise indicated.

TABLE A2.2

Reporting problems with respect to the percentage of women receiving late or no prenatal care

City	Year(s) in which problem occurred	Nature of problem	Implications of problem
Boston, MA	1996	Massachusetts began asking for the exact date of the first prenatal care visit instead of the month prenatal care began.	This change produced more accurate data on the percentage of women receiving late or no prenatal care beginning in 1996. However, the apparent increase in this percentage between 1995 and 1996 may reflect, at least in part, the change in the wording of the question.
Cleveland, OH Columbus, OH	1997-1998	According to NCHS data for Ohio, the percentage of births for which no prenatal care was reported nearly doubled between 1996 and 1998. ¹⁰ Over three-quarters of the reported statewide increase in the percentage of births with no prenatal care occurred in Cleveland and Columbus. In Cleveland, this percentage tripled between 1996 and 1998; in Columbus, this percentage increased nine fold. According to a representative of the Ohio Department of Health, this increase may be associated with incomplete recording of information on prenatal care by several hospitals in Cleveland and Columbus.	Since the increase in the percentage of births in which no prenatal care was recorded may be due to reporting problems, the percentage of women receiving late or no prenatal care in 1997 and 1998 may be overstated and should be viewed with caution.
Sacramento, CA	1995	Births in which the month prenatal care began was unknown were mistakenly coded as having prenatal care beginning in the third trimester of the pregnancy.	Data for 1995 are not displayed due to this coding problem, which caused the percentage of mothers receiving late or no prenatal care to be substantially overstated.
Oakland, CA San Jose, CA	1995	There was a temporary increase in the percentage of births to women who received late or no prenatal care.	The reason for the increase is not known.

¹⁰ Source: unpublished tabulation provided by Stephanie Ventura, National Center for Health Statistics.



The Annie E. Casey Foundation funds a nationwide network of KIDS COUNT projects that provide a more detailed community-by-community picture of the condition of children.

Alabama Linda Tilly <i>Executive Director</i>	VOICES for Alabama's Children PO Box 4576 Montgomery, AL 36103 (334) 213-2410 (334) 213-2413 (fax) ltilly@alavoices.org www.alavoices.org	Arkansas Julie Robbins <i>Director of Communications & Development</i>	Arkansas Advocates for Children & Families 523 S Louisiana Suite 700 Little Rock, AR 72201-4531 (501) 371-9678 (501) 371-9681 (fax) julesrob@swbell.net www.aradvocates.org
Alaska Norm Dinges <i>Project Director</i>	KIDS COUNT Alaska University of Alaska-Anchorage Institute of Social and Economic Research 3211 Providence Dr. Anchorage, AK 99508 (907) 786-7744 (907) 786-7739 (fax) afngd@uaa.alaska.edu www.kidscount.alaska.edu	California Amy Dominguez-Arms <i>Director of Policy</i>	Children Now 1212 Broadway Suite 530 Oakland, CA 94612 (510) 763-2444 (510) 763-1974 (fax) ada@childrennow.org www.childrennow.org
Arizona Dana Naimark <i>Assistant Director</i>	Children's Action Alliance 4001 N 3rd St. Suite 160 Phoenix, AZ 85012 (602) 266-0707 (602) 263-8792 (fax) dnaimark@azchildren.org www.azchildren.org	Colorado Kaye Boeke <i>KIDS COUNT Coordinator</i>	Colorado Children's Campaign 225 E 16th Ave. Suite B-300 Denver, CO 80203 (303) 839-1580 (303) 839-1354 (fax) kaye@coloradokids.org www.coloradokids.org

Appendix 3: Primary Contacts for State KIDS COUNT Projects

Connecticut	Connecticut Association for Human Services
Amy Sampson <i>KIDS COUNT Coordinator</i>	110 Bartholomew Ave. Suite 4030 Hartford, CT 06106 (860) 951-2212 (860) 951-6511 (fax) www.cahs.org

Florida	Center for the Study of Children's Futures
Susan Weitzel <i>Director</i>	Florida Mental Health Institute University of South Florida 13301 Bruce B. Downs Blvd. Tampa, FL 33612 (813) 974-7411 (813) 974-8534 (fax) weitzel@hal.fmhi.usf.edu www.floridakidscount.org

Idaho	Mountain States Group
Linda Jensen <i>KIDS COUNT Director</i>	1607 W Jefferson St. Boise, ID 83702 (208) 388-1014 (208) 331-0267 (fax) ljensen@mtstatesgroup.org www.idahokids.org

Delaware	University of Delaware
Teresa Schooley <i>KIDS COUNT Project Director</i>	298K Graham Hall Newark, DE 19716 (302) 831-4966 (302) 831-4987 (fax) terrys@diamond.net.udel.edu www.dekidscount.org

Georgia	Georgians For Children
Ann Grace Marchetti <i>KIDS COUNT Project Director</i>	300 W. Wieuca Rd., NW Suite 216 Atlanta, GA 30342 (404) 843-0017 (404) 843-0019 (fax) ann@georgians.com www.georgians.com

Illinois	Voices for Illinois Children
Julie Zasadny <i>Director of Communications</i>	208 S LaSalle St. Suite 1490 Chicago, IL 60604 (312) 516-5551 (312) 456-0088 (fax) jzasadny@voices4kids.org www.voices4kids.org

District of Columbia	DC Children's Trust Fund
Sonali Patel <i>Director of Public Policy</i>	2021 L St., NW Suite 205 Washington, DC 20036 (202) 624-5555 (202) 624-0396 (fax) spatel@dcctf.org www.dcchildrenstrustfund.org

Hawaii	Center on the Family
Marcia Hartsock <i>KIDS COUNT Project Director</i>	University of Hawaii – Manoa 2515 Campus Rd. Miller Hall 103 Honolulu, HI 96822 (808) 956-4136 (808) 956-4147 (fax) marciab@hawaii.edu uhfamily.hawaii.edu

Indiana	Indiana Youth Institute
Karen Ruprecht <i>Director of Programs</i>	3901 N Meridian St. Suite 200 Indianapolis, IN 46208-4046 (317) 924-3657 (317) 924-1314 (fax) ruprecht@iyi.org www.iyi.org

284

285

Appendix 3: Primary Contacts for State KIDS COUNT Projects

Iowa Michael Crawford <i>KIDS COUNT Project Director</i> Child & Family Policy Center 218 Sixth Ave. Suite 1021 Des Moines, IA 50309 (515) 280-9027 (515) 244-8997 (fax) mcrawford@cfpciowa.org www.cfpciowa.org	Louisiana Shannon Johnson <i>KIDS COUNT Coordinator</i> Agenda for Children PO Box 51837 New Orleans, LA 70151 (504) 586-8509 (504) 586-8522 (fax) Sjohnson@agendaforchildren.org www.agendaforchildren.org	Massachusetts Barry Hock <i>KIDS COUNT Coordinator</i> Massachusetts Citizens for Children 14 Beacon St. Suite 706 Boston, MA 02108 (617) 969-3235 (617) 742-7808 (fax) barryhock@insidehealthcare.com www.masskids.org
Kansas Gary Brunk <i>Executive Director</i> Kansas Action for Children PO Box 463 Topeka, KS 66601 (785) 232-0550 (785) 232-0699 (fax) brunk@kac.org www.kac.org	Maine Lynn Davey <i>KIDS COUNT Director</i> Maine Children's Alliance 303 State St. Augusta, ME 04330 (207) 623-1868 (207) 626-3302 (fax) ldavey@mekids.org www.mekids.org	Michigan Jane Zehnder-Merrell <i>KIDS COUNT Project Director</i> Michigan League for Human Services 1115 S Pennsylvania Ave. Suite 202 Lansing, MI 48912-1658 (517) 487-5436 (517) 371-4546 (fax) janez@mlan.net www.milhs.org
Kentucky Valerie Salley <i>KIDS COUNT Coordinator</i> Kentucky Youth Advocates, Inc. 2034 Frankfort Ave. Louisville, KY 40206 (502) 895-8167 (502) 895-8225 (fax) vsalley@kyyouth.org www.kyyouth.org	Maryland Jennean Everett-Reynolds <i>KIDS COUNT Project Director</i> Advocates for Children & Youth 34 Market Place 5th Floor Bernstein Building Baltimore, MD 21202 (410) 547-9200 (410) 547-8690 (fax) jenneanr@aol.com www.acy.org	Minnesota Diane Benjamin <i>KIDS COUNT Director</i> Children's Defense Fund- Minnesota 200 University Ave., W Suite 210 St. Paul, MN 55103 (651) 227-6121 (651) 227-2553 (fax) benjamin@cdf-mn.org www.cdf-mn.org

286

287

Appendix 3: Primary Contacts for State KIDS COUNT Projects

Mississippi K.C. Caldwell <i>KIDS COUNT</i> <i>Project</i> <i>Coordinator</i>	Mississippi Forum on Children & Families, Inc. 737 N President St. Jackson, MS 39202 (601) 355-4911 (601) 355-4813 (fax) kccald@meta3.net www.mfcf.org	Nebraska Janet Johnston <i>Research</i> <i>Coordinator</i>	Voices for Children in Nebraska 7521 Main St. Suite 103 Omaha, NE 68127 (402) 597-3100 (402) 597-2705 (fax) voices@uswest.net	New Jersey Eloisa Hernandez <i>KIDS COUNT</i> <i>Director</i>	Association for Children of New Jersey 35 Halsey St. Newark, NJ 07102 (973) 643-3876 (973) 643-9153 (fax) eloisa@acnj.org www.acnj.org
Missouri Cande Iveson <i>KIDS COUNT</i> <i>Project Director</i>	Citizens for Missouri's Children 621 E McCarty Suite D Jefferson City, MO 65101 (573) 634-4324 (573) 634-7540 (fax) cmcwest@socket.net www.mokids.org	Nevada Marlys Morton <i>KIDS COUNT</i> <i>Project</i> <i>Coordinator</i>	Center for Business and Economic Research UNLV 4505 S Maryland Pkwy. Box 456002 Las Vegas, NV 89154 (702) 895-3191 (702) 895-3606 (fax) kidscount@nevada.edu www.nscee.edu/cber	New Mexico Kelly O'Donnell <i>KIDS COUNT</i> <i>Coordinator</i>	New Mexico Advocates for Children & Families 8505 Rancho Diego Place, NE Albuquerque, NM 87113 (505) 823-9324 (505) 244-9509 (fax) kodonnell@uswest.net www.nmadvocates.org
Montana Steve Seninger <i>Director of Economic Analysis</i>	University of Montana Bureau of Business and Economic Analysis Missoula, MT 59812-6840 (406) 243-5113 steve.seninger@business.umt.edu	New Hampshire Ellen Shemitz <i>President</i>	Children's Alliance of New Hampshire 2 Greenwood Ave. Concord, NH 03301 (603) 225-2264 (603) 225-8264 (fax) eshemitz@childrennh.org www.childrennh.org	New York Deborah Benson <i>Director of Policy Planning & Research</i>	State of New York Council on Children and Families 5 Empire State Plaza Suite 2810 Albany, NY 12223-1533 (518) 474-6294 (518) 473-2570 (fax) debbie.benson@ccf.state.ny.us www.capital.net/com/council

288

ERIC

289

Appendix 3: Primary Contacts for State KIDS COUNT Projects

North Carolina Joann Haggerty <i>Research & Data Director</i> North Carolina Child Advocacy Institute 311 E Edenton St. Raleigh, NC 27601-1017 (919) 834-6623 (919) 829-7299 (fax) jhaggerty@intrex.net www.ncchild.org	Oklahoma Marlo Nash <i>KIDS COUNT Coordinator</i> Oklahoma Institute for Child Advocacy 420 NW 13th St. Suite 101 Oklahoma City, OK 73103 (405) 236-5437 (405) 236-5439 (fax) marlonash@otca.org www.otca.org	Rhode Island Elizabeth Burke Bryant <i>Executive Director</i> Rhode Island KIDS COUNT 1 Union Station Providence, RI 02903 (401) 351-9400 (401) 351-1758 (fax) ebb@rikidscount.org www.rikidscount.org
North Dakota Ann Lochner <i>Director</i> North Dakota KIDS COUNT University of North Dakota PO Box 7090 Gillette Hall Room 3 Grand Forks, ND 58202-7090 (701) 777-4086 (701) 777-4257 (fax) ann_lochner@mail.und.nodak.edu	Oregon Tonia Hunt <i>Public Policy Director</i> Children First for Oregon PO Box 14914 Portland, OR 97214 (503) 236-9754 (503) 236-3048 (fax) tonia@cfo.org www.cfo.org	South Carolina Baron Holmes <i>KIDS COUNT Project Director</i> South Carolina Budget & Control Board PO Box 12444 Columbia, SC 29211 (803) 734-2291 (803) 734-1276 (fax) bholmes@ogc.state.sc.us www.ors.state.sc.us/kc.html
Ohio David Norris <i>Communications Manager</i> Children's Defense Fund Ohio 52 E Lynn St. Suite 400 Columbus, OH 43215-3551 (614) 221-2244 (614) 221-2247 (fax) dnorris@cdfohio.org www.cdfohio.org	Pennsylvania Diane Ollivier <i>KIDS COUNT Director</i> Pennsylvania Partnerships for Children 20 N Market Sq. Suite 300 Harrisburg, PA 17101-1632 (717) 236-5680 (717) 236-7745 (fax) doliivier@papartnerships.org www.papartnerships.org	South Dakota Carole Cochran <i>Project Coordinator</i> Business Research Bureau University of South Dakota 414 E Clark St. Vermillion, SD 57069 (605) 677-5287 (605) 677-5427 (fax) ccocochran@usd.edu www.usd.edu/brbinfo/brb/kc

290

BEST COPY AVAILABLE

291

Appendix 3: Primary Contacts for State KIDS COUNT Projects

Tennessee
Pam Brown
KIDS COUNT
Project Director
 Tennessee Commission on Children & Youth
 Andrew Johnson Tower
 9th Floor
 710 James Robertson Pkwy.
 Nashville, TN 37243-0880
 (615) 532-1571
 (615) 741-5956 (fax)
 pbrown3@mail.state.tn.us
 www.state.tn.us/tccy

Virgin Islands
Dee Baecher-Brown
Executive Director
 The Community Foundation of the Virgin Islands
 PO Box 11790
 38A Dronningens Gade
 St. Thomas, USVI 00801
 (340) 774-6031
 (340) 774-3852 (fax)
 dbrownctfvi@worldnet.att.net

Washington
Richard Brandon
Executive Director
 Human Services Policy Center
 Institute for Public Policy & Management
 University of Washington
 324 Parrington
 Box 353060
 Seattle, WA 98195-3060
 (206) 543-8483
 (206) 616-5769 (fax)
 brandon@u.washington.edu
 www.hspc.org

Texas
Pam Hormuth
KIDS COUNT
Project Director
 Center for Public Policy Priorities
 900 Lydia St.
 Austin, TX 78702
 (512) 320-0222
 (512) 320-0227 (fax)
 hormuth@cphp.org
 www.cphp.org/kidscount

Virginia
Lisa Wood
KIDS COUNT
Project Director
 Action Alliance for Virginia's Children & Youth
 701 E Franklin St.
 Suite 807
 Richmond, VA 23219
 (804) 649-0184
 (804) 649-0161 (fax)
 lisa@vakids.org
 www.vakids.org

West Virginia
Margie Hale
Executive Director
 West Virginia KIDS COUNT Fund
 1031 Quarrier St.
 Suite 313
 Atlas Building
 Charleston, WV 25301
 (304) 345-2101
 (304) 345-2102 (fax)
 hn3174@handsnet.org
 www.wvkidscountfund.org

Utah
Terry Haven
KIDS COUNT
Coordinator
 Utah Children
 757 East South Temple St.
 Suite 250
 Salt Lake City, UT 84102
 (801) 364-1182
 (801) 364-1186 (fax)
 terryh@utahchildren.net
 www.utahchildren.net

Vermont
Carlen Finn
Executive Director
 Vermont Children's Forum
 PO Box 261
 7 Court St.
 4th Floor
 Montpelier, VT 05601
 (802) 229-6377
 (802) 229-4929 (fax)
 vctyf@together.net

Wisconsin
M. Martha Cranley
KIDS COUNT
Coordinator
 Wisconsin Council on Children & Families
 16 N Carroll St.
 Suite 600
 Madison, WI 53703
 (608) 284-0580
 (608) 284-0583 (fax)
 mcranley@wccf.org

Appendix 3: Primary Contacts for State KIDS COUNT Projects

Wyoming	Wyoming Children's Action Alliance
Kathy Emmons	2622 Pioneer Ave.
Executive	Cheyenne, WY 82001
Director	(307) 635-2272
	(307) 635-4680 (fax)
	kemmons@trib.com
	www.wykids.com

294

295

The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of the United Parcel Service, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and communities fashion more innovative, cost-effective responses to these needs.

Additional copies of this
report are available from:

**The Annie E. Casey
Foundation**

701 St. Paul Street

Baltimore, MD 21202

410.223.2890 Publications Line

410.547.6600

410.547.6624 Fax

www.kidscount.org



**The Annie E. Casey
Foundation**
701 St. Paul Street
Baltimore, MD 21202
410.547.6600
410.547.6624 Fax
www.kidscount.org



Child Trends
4301 Connecticut Avenue, NW
Suite 100
Washington, DC 20008
202.362.5580
202.362.5533 Fax
www.childtrends.org

BEST COPY AVAILABLE



U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)



NOTICE

REPRODUCTION BASIS



This document is covered by a signed "Reproduction Release (Blanket) form (on file within the ERIC system), encompassing all or classes of documents from its source organization and, therefore, does not require a "Specific Document" Release form.



This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").